REPORT

ON THE

HEALTH

OF THE

BOROUGH OF WALSALL,

DURING THE YEAR ENDED

DECEMBER 31st, 1918,

BY

HARRY SHORE, M.D., B.S.,

Diploma in Public Health, University of Durham,

Medical Officer of Health for the Borough,

Acting Tuberculosis Officer,

School Medical Officer and Police Surgeon.

HEALTH COMMITTEE

OF THE

WALSALL CORPORATION,
1918.

ALDERMAN WALKER, Chairman.

COUNCILLOR SLATER, J.P. Vice-Chairman.

ALDERMAN WILLIAMS

COUNCILLOR LAYTON

. LYNCH

" O'MEARA

COUNCILLOR SHELLEY

, SOMERFIELD

. WARD

" WARNER.

Meet on the Third Monday in each Month, at 3 p.m.

Medical Officer of Health.

HARRY SHORE, M.D., B.S., D.P.H.

Tuberculosis Officer.

IAMES A. M. CLARK, M.D., Ch.B., D.P.H.

Assistant M.O.H. and Schools Medical Inspector.

P. E. CARROLL, M.B., B.Ch.

School Dentist.

H. N. GROVE, L.D.S.

Public Analyst.

E. W. T. JONES, F.I.C.

Chief Sanitary Inspector.

ARTHUR THOMAS HUBBLE,

Cert. as Inspector of Nuisances and as Meat Inspector.

Assistant Inspectors.

ERNEST F. B. A. MINER (No. 1 District) Cert. I.N. and as Meat Inspector.

ALBERT FORD (No. 2 District) Temporary, Cert. I.N. FRED TURNER (No. 3 District) Cert. I.N. and as Meat Inspector.

Superintendant Health Visitor and Inspector of Midwives. Miss M. E. HUGHES, Cert. H.V., and C.M.B.

Assistant Health Visitors.

Miss M. L. MOORE, C.M.B.

" L. PAICE, C.M.B.

Mrs. A. SAUNDERS, C.M.B.

Clerk.

Miss D. BOYCE.

Office Boy.

W. ROYLE.

STATISTICAL SUMMARY FOR 1918.

Area in Acres	0 * 6	•••	7,358
Estimated Civil Population, Jur	ne, 1918		92,045
Estimated Population. 1918—			
For calculating birth rate		• • •	98,192
,, ., death rate		•••	87,635
Population per Acre	•••		12.78
Number of Houses in Borough		• • •	19,865
Number of Persons per House	•••		4.68
Rateable Value		<i>Ž</i>	£294,111
ld. in the £ yields for General	Purpose	25	£1,018
Number of Marriages in Walsai	ll Regis-	-	. 077
tration District	• • •	• • •	1,077
Birth Rate	•••	• • •	21:46
Death Rate	•••	• • •	19:95
Infantile Death Rate per 1,000 E	3irths		110:55
Zymotic Death Rate	•••	•••	1 42
Respiratory Death Rate			4.40
Total Deaths from Diarrhæa	•••		39
Infantile Mortality from Diarrha	ea per		
1,000 Births			11.45
Death Rate from Phthisis	•••	• • •	1 · 49
Death Rate from other forms of	f Tubero	culosi	s 0:37
Percentage of Uncertified Death	hs		0.00

COUNTY BOROUGH OF WALSALL.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH.

To the Mayor, Aldermen and Councillors of the County Borough of Walsall.

MR. MAYOR, MISS NEWMAN AND GENTLEMEN,

The influence of the stress of war conditions throughout the past year again renders comparison with the statistics of previous years somewhat fallacious, perhaps the truest influence may be noted in connection with the continued declining birth rate. However the attempt to draw the contrast is made, one is confronted with cumulative effects throughout of deprivations and mental anxieties undergone, and though one can only conjecture, yet these effects must have been not inconsiderable, to instance, what extent have they influenced recoveries or fatalities during the past Influenza epidemic?

In common with the rest of the country, our birthrate has declined to 21'46; the general death rate has advanced to 19'95, the infantile mortality figure is 110'55.

From our knowledge gained from various sources, and particularly our Welfare Centres, I feel that there is much to be thankful that our statistics are not worse than they have proved.

In the Health Department the question of defects, nuisances, etc., of various kinds to be remedied, has been rendered more difficult and complex of solution, again due to war influence upon the labour and material etc. market.

The disadvantage of a new health visiting staff, whom our mothers had to learn to know, naturally occasioned falling off in the volume of work at first, however, matters are progressing in a more satisfactory direction.

Our Baby Week effort consisted of two meetings at one of which the principal speaker was Dr. Barbara Tchowkovsky and at another, Lady Nott Bower; and a Pram Parade was held. This year it is hoped to have a complete week.

The Local Government Board desires that a Medical Officer of Health's report shall be brief so far as practicable, but should include reference to the Influenza Epidemic, yet there are items which I desire to record in as much as a report of this character is intended to reach (beyond the limits of those to whom it is immediately addressed), the local general public, and I trust arouse a keener interest and feeling than usual. It has been said that there are two occasions upon which health, or perhaps health matters, are estimated at their true worth, in illness in direct ratio to its gravity, and prior to an appeal to municipal suffrage, I will merely instance the extension of female suffrage, discretion precludes further amplifying the subject.

To the Mayor and Members of the Council, I tender my thanks for the consideration shown me throughout the past year, to the various voluntary workers who have assisted in connection with Infant Welfare work, I again express my indebtedness. The hearty support, cooperation and loyalty of Miss Hughes, Mr. Hubble and the Department's Staff are again a pleasant memory of a year's work carried on in difficult times.

I have the honour to remain,

Your obedient Servant,

HARRY SHORE, M.D.,

Medical Officer of Health.

VITAL STATISTICS.

Population.

The estimate of the population, revised for 1918 by the Registrar-General, is used for the calculation of the death rate and birth rate in this Report.

For the death rate, the population is estimated as 87,635, and for the birth rate, 98,192. (I may point out that these figures act adversely in each case, the birth rate being lowered, while the death rate is increased).

Table giving the population at the last three census:

1891	1901	1911
71,791	86,440	92,130

Marriages.

There is a decrease in the number of Marriages this year, 1077 taking place, whilst last year 1112 were contracted.

Births.

The number of Births registered in the Borough for the year was 2,088, of which 1,015 were males, and 993 were females. This gives a rate of 21'46, last year we had 2,152 births, with a rate of 21'94.

Eighty-nine of these births were illegitimate.

The average birth rate for the last five years is 25'17

The following table gives the number of births registered in the Borough:—

		Male	Female	Total
1st quarter 2nd ., 3rd ,, 4th ,,		248 256 242 269	241 255 245 252	489 511 487 521
Totals	•	1015	993	2008

Deaths.

The number of deaths registered during the year was 1,752 giving a rate per thousand of the population of 19'95, an increase on the previous year, when we had 1.398 deaths with a rate of 15'89. If we exclude the number of persons (54) dying in the Borough belonging to other districts, and include (89) those belonging to the Borough, dying beyond the Borough, we have a corrected number of 1,787, giving a death rate of 20'39. The average death rate for the past five years is 16'94.

Mortality from all causes, at subjoined ages of residents belonging to the Borough.

			2 and under 5	under	under		under	65 and upwards
1787	222	114	140	115	130	292	383	391

Number of deaths in each of the eight Wards, together with their estimated population and death rate.

Name of Ward.	Population	No. of Deaths	Rate. per 1000 per annum.
Bitchills Hatherton Paddock Bridge Pleck Galdmore	7992 10739 13243 8719 9921 7819 13540	142 232 313 214 170 202 256 243	17.76 21.60 23.63 24.54 17.13 25.83 18.89

This table does not include the deaths of non-residents occurring in the Workhouse or in the Walsall General Hospital. Residents of the Borough, dying in any of these Institutions, are included, and are each put into the Ward in which they resided.

Fifteen persons, whose deaths are registered in the Workhouse, but of whom no address excepting Walsall could be got, are entered into the tables for the whole district, but could not be classified into Wards. By referring to the table in which the separate death rate for each Ward is given, it will be seen in what particular part of the Borough the highest and lowest death rate occurred.

Bridge Ward has this year the highest, viz.: 25'83, while Caldmore Ward with a rate of 15'51 has the lowest death-rate in the Borough.

Coroner's Inquests.

One hundred and thirteen Inquests were held in the Borough during the year, 68 males and 45 females.

Infantile Mortality.

The Infantile Mortality is calculated by the ratio of deaths under one year to 1,000 births registered, this year the rate is 110.55. In 1917 the rate was 110.59, in 1916 the rate was 112.12, in 1915 the rate was 149.46, in 1914 the rate was 115.92 and in 1913 it was 156.75.

The number of deaths recorded was 222, giving us a death-rate per 1,000 of the whole population of 2.53. In 1917 the rate was 2.65, in 1916 the rate was 3.15, in 1915 the rate was 4.04, in 1914 the rate was 3.41, and in 1913 the rate was 4.69.

Commenting upon the causes of death, it will be seen that Premature Birth, Atrophy and Debility accounted for 73 deaths; Pneumonia, 29; Bronchitis, 20; Measles, 4; Whooping Cough, 14; Diarrhœa and Enteritis, 25.

The rate amongst illegitimate children was 247'19.

The foremost item of reform at the present time is what is called reconstruction, or in popular phraseology "making England a land fit for heroes to live in," and in so far as it applies locally, our requirements amongst others may be considered.

Adequate Housing Accommodation

Though this subject has been ventilated so extensively, I feel some observations are not redundant.

In the first Annual Report which I had the honour to present, I gave, perhaps crudely, some views upon the influence of environments on health, having watched the steadily increasing lack of sufficient housing accommodation, together with the inevitable toleration of bad, lest worse might accrue, and having been railled by some "that it was tinkering with health until housing and its allied problems are improved," I feel that this matter is of the most pressing importance, one was sometimes nauseated by having to reply to house enquirers that no help could be forthcoming yet.

At a modest estimate, I consider the Borough needs at least 1,000 new houses as speedily as may be possible. The ilousing Committee has the matter under deliberation.

If the authorities could exercise a tithe of the speeding up that took place in munition works, the problem would be quickly solved.

If humanity be likened to a huge structure, one can realize of what supreme importance its foundations are, maless well laid and sound, however spectacular or pleasing its super-structures appear, they become more

or less unsafe when tried by time, stress or corroding atmospheric influences, these defects may be lessened by strengthening by builders' arts, but as the foundation of the whole cannot receive adequate attention, the evil day is merely postponed.

How much avoidable human health wastage has been incurred in the past has been emphasised by Army returns generally, and experience locally, to instance Tuberculosis work, more than supports this view.

In an extra-local sense, this has always seemed to me to be a matter upon which the woman's point of view could well be invited, and would be of much value; after all, mere man is more in the nature of a lodger in the house, which is occupied by his wife more or less most of the 24 hours daily.

Items will readily suggest themselves in which her judgment would be supreme, if not final, e.g., washing in all its aspects and varieties.

The questions of monetary loss, etc. are beyond the scope of this report, yet I again feel that the health value of existences spent in healthy domiciles is entitled to receive higher consideration than other forms of municipal enterprise that may be contemplated.

Perhaps the hardest matter to solve will be that of the dirty tenant. I sometimes think it is a parallel to the old conundrum "which came first, the hen or the egg"; anyhow this at least is obvious, the individual who starts life amidst squalor, dirt and dilapidation is to say the least badly handicapped. There was a crystalized wisdom and foresight in the reply of a public spirited manufacturer who, when chaffed concerning the extreme likelihood of dirty tenants occupying his proposed artisan dwellings said "that he was building for the next generation." I merely record this dictum for the benefit of optimists who believe a modern artisan's house is a panacéa for many present ills.

The critic of this type of tenant is frequently himself a person blessed with the comforts and appurtenances of a well ordered house, and fails to adequately appreciate the demoralising influences of the reverse condition.

Perhaps the nearest approach to the solution will be upon the lines of tenants becoming their own landlords, and thus having a vested personal interest in their homes.

Finally a review over an extended period should be taken before the dirty tenant is condemned wholesale, my experience of some 27 years is that a vast improvement is discernable.

Hospital Accommodation

For certain types of cases of Infectious Diseases is a matter that should receive consideration, and I trust, solution in the near future. The task of a Medical Officer of Health who can offer but meagre assistance in Medical other reasons is an unenviable one; those sections of the community who cannot help themselves have certain channels of relief afforded, and at least this can be classed as one.

Infant Welfare Work.

Concerning which statistics, etc. will be found on pages 26, 27, 28 has gradually strengthened my conviction, that two points of view are entitled to favourable and early

consideration, they are (I) facilities for cases of infants which we see from time to time at a standstill, the victims of environment, to whom the cure is a change of air, briefly, some establishment amongst congenial and healthy surroundings where such may receive the necessary change, "to set them on their feet." (2) Some scheme for the residential treatment of infants who are ill in contra distinction to those who are slightly ailing. I write with the knowledge of the good work which our local Hospital does with the accommodation at its disposal, contenting myself with a statement that very much more requires doing, and trust that in the near future the matter might receive appropriate attention.

Restrictions

The irritation occasioned by restrictions to which I alluded last year, as I expected, have increased beyond the stage of exasperation, and since Nov. 11th, the masses in general feel that the alleged reasons for their imposition, which are declining almost to a vanishing point, for their comfort and well being should be removed. One wonders at their patient toleration, and that they have not adopted the only argument or weapon that seems to carry conviction and secure what they feel is due to them. temperance question is a most thorny and debatable one, writing as one who has had a fair insight into human nature as it really is, and believing in the inability of making a people abstainers by Acts of Parliament, I am convinced that these restrictions as to quantity and quality should be removed forthwith, they would make for the general well being and contentment of the community.

No one holds a brief for the drunkard, some even aver that his opposite extremist requires equally restraining, still such arguments are no justification for the freedom of enjoyment of the liberties of the temperate being practically suspended, or even judged. by reason of the standard of the intemperate.

Looking back over a quarter of a century, my impression is that the masses have progressively become more temperate, and just as our national existence has proved secure in their keeping, so this matter can with equity be safely entrusted to them.

Theoretically the restrictions were nobly ideal in their conception, in practice they were replete with class favouritism. Those whom they sought to curb endured the least, and those to whom they were unnecessary, the most of them. The "regular customer," a benign appellation frequently interchangeable with the "chronic tippler" was comparatively immune from their actions, whilst the temperate individual, particularly in connection with illness, suffered to the full because he was not a regular customer.

The sinister comedy was that the House of Commons declined to come under this yoke for quite an inordinate period.

One has sympathy with and sees the force of the argument of the lofty sentiments that intoxicant, particularly whisky, curtailments may prevent the moral fibre of our race being undermined, but when one reads that comparatively every facility is allowed for this to be exported in almost unlimited amount, that our kindred abroad may run the risk of this corruption and at a very much cheaper rate than here, one is impelled to doubt the sincerity of motives, and feel that a cogent reason is furnished for reverting to old conditions.

Beer and cheese are two items in great demand here by hard manual workers as articles of diet, the genuine variety of the former is practically unobtainable, its aqueous decection substitute limitedly extant, the latter most restricted in supply, and popularly believed to have been diverted abroad, though this is officially denied.

Much credit is assumed in certain quarters that the decrease in drunkenness and crime is the result of these restrictions, the first must logically be so in a measure, but the more feasible explanation. I believe is that so many have answered the call of national duty; certain towns are usually free from drunkenness during their annual outings to the seaside; the records of a penal settlement are even more impressive still on both scores, from the completeness of the restrictions.

The comparatively "dry period" endured here, has this at least to its authors' credit, the masses have had clearer minds for thinking, more leisure to be discontented with their lot and disatisfied with their housing condition; its outcome will doubtless make for their ultimate uplifting, perhaps in a manner not anticipated by autocracy.

My general impression gathered from wide and divergent sources on social matters that have affected the welfare of the community for upwards of 4 years, practically demonstrated the epigram that though "it is the same law for the rich as the poor, in practice the poor have had so much more of it."

In all earnestness this disparity calls for as speedy redress as possible, it is most inimical to the health of the community and requires but little further to lead to much graver conditions.

Allowances

In its application common to Walsall, the allowances to dependants of Sailors and Soldiers are totally inadequate, great stress is laid upon the fact that we cannot have an AI nation with a C3 manhood, I suggest you cannot have AI children on C3 allowances, and the least we owe to those who have made such sacrifices is to see that these allowances are AI.

The conversion of those who feel the present rate of payment is sufficient, would be exceedingly rapid if they or theirs were compelled to live on these allowances.

New Legislation

The Ministry of Health Bill, which promises shortly to become law, will, it is hoped, supply the driving and compelling power for further advancement of health matters, but at the same time doubtless it will stir into activity those personal interests which under the disabilities imposed by war conditions, have to a certain degree, been permitted to lie dormant and free from the attention of the Health Department.

I foresee veiled opposition to advancement in health matters, in the abstract there is concensus of opinion as to its desirability, if not necessity, disagreement is on the concrete question of who should pay. Theoretically a Medical Officer of Health should ignore such details, practically he is up against this constantly, public atterances and private dicta are sometimes at variance.

It is obvious that much financial hardship will result in dealing with houses that have served their generation, one can realise the hard view of the individual who sees his (perhaps) only source of income vanish through our activities, one cannot shut ones eyes to another type who would hinder by procrastination, etc., competition in housing accommodation which the future has in store.

The moral force of public opinion will be more required than hitherto to strengthen our work for the betterment of the community, a wider interest in the matter is much desired, and a deeper insight on its part into the probabilities of inimical elements that discount or impede our efforts, and I wish to emphasize how much this expressed support aids in carrying out our duty as we see it.

With the further extension of franchise to women an element is added which should be of much value in the near future, so many aspects of our work belong to the sphere of woman's realm, and I for one believe that women will take an interest equal at least in intelligence to that of men. I understand, moreover they have a knack of seeing that they get what they want.

Though Walsall is classed as a necessitous area for educational grant purposes, in all health matters where a State grant is available for work undertaken, it fares exactly the same as prosperous Boroughs, the very nature of industrial occupations generally speaking denotes conditions that undermine health, and in the long run produce a certain train of sequence, impaired wage earning capacity reacting detrimentally to living and housing matters, etc., and further, unfortunately this class of people are blessed (?) with offspring above the average in number; in other words, such a type of the masses should necessitate more expenditure in a Borough such as ours, that can least afford it. I feel how unfairly a flat rate of grant penalises our town, and it is hoped that this aspect may engage the attention of the Ministry of Health to the benefit of our Borough, and others similarly situated.

In the previous year's report I recorded some views on profiteering, there is so much that could be further said on this matter, but I content myself by briefly stating that a section of the community are still exploiting to their utmost ability the subject of supply and demand, under the self excusing subterfuge that we are at war," an adroit confession that that they were at war—with the consumer, whilst there has been the spectacle of the House of Commons somewhat complacently tolerating the sophistry that "these matters are being carefully watched," or "receiving serious consideration"; in a similar manner so may a throttle-down safety valve be watched, though only up to a certain degree.

"Influenza" Epidemic

From the information at my disposal, the recent spidemic of "Influenza" may be assumed to have commenced its ravages about the middle of October, and increased in mortality in successive weeks from the week ending October 26th which was 5, as follows: 7. 22, 42, 58, 70. For week ending December 7th, it was 63, and successively 20, 16, 5, 2. At the time of writing there have been no further deaths recorded.

In the first week under review, 3 deaths were recorded in the Pleck Ward, and I in each of the Leamore and Paddock Wards, the fatalities then became general throughout the Borough. Its mortality incidence in the Wards was as follows:—

BIRCHILLS		55
LEAMORE	•••	47
PLECK	•••	43
HATHERTON	•••	37
BLOXWICH		31
CALDMORE		27
BRIDGE	• • •	23
PADDOCK		19

The actual cause of the epidemic is not yet determined, its bacteriology is still the subject of investigation by the Local Government Board.

Using the moderate word "inferior," the bacon with which the public has been supplied, at maximum prices, is believed by many to be the cause of the epidemic, I understand that the importation of the worst kind of this commodity has now been stopped, as to these being facts and their bearings, I express no opinion, but merely record the popular belief.

The disease was highly infectious in character, and most virulent in its devastating effect and rapidly fatal. Locally its period of incubation is believed to be about 48 hours' duration. Occupation appears to have had no bearing upon its fatality, which was mostly between the ages of 25 and 45 years, and in the main amongst the working classes.

The stress of work thrown upon the medical profession and Nurses was tremendous, and must have had its influence upon the prospects of recovery in certain cases.

It is a reasonable and fair inference that some features had a material bearing upon the course of the malady amongst certain classes of the community particularly the working classes, such as overcrowding from insufficiency of housing accommodation, implying vitiated atmosphere with its well-known ill effects, which doubtless aided the spread of infection—stress from physical fatigue from war conditions—lack of accustomed food—together with impairment of quality of same.

In particular, I feel most strongly that though in theory some provision is made under the Food Control Regulations for food requirements of illness, yet in practice, by the time the necessary orthodox steps have been taken to secure the same, the patient would be in extremis. It is a debatable point beyond the scope of this report, but I believe that lack of facilities for obtaining stimulants, and then often only by a breach of the law, pressed with great severity upon those who could not afford the luxury of a wine cellar.

From a lengthy experience of human nature in illness, I know that faith is a determining factor, faith in stimulants is the general rule, and the inference of the absence of this "faith" requires no further elaboration.

Welfare is a term frequently interchangeable with faring well, I take this opportunity of publicity to point out that this is merely one aspect of what I described in my last annual report as irksome and irritating restrictions, I believe that much of the social unrest that we are at present experiencing might be is noved by a relaxation of these restrictions, and the well-being and health of the community would be bettered thereby.

The Schools have been closed with slight inter-Missions from October 29th to December 30th.

The difficulties which arose in connection with the removal of bodies from infected houses, burials, etc., have been dealt with by circulars to relatives of deceased, and the undertakers were advised as to certain procedures to be adopted.

The attendances of Scholars at local Cinemas was prohibited until December 21st.

In view of the possibility of the recrudescence of Influenza, I trust that my views will not have been presented in vain.

Venereal Diseases

Treatment is afforded and given in connection with the above diseases at the Walsall General Hospital, of which department Dr. A. M. Stuart is the Medical Officer. There are three sessions, Tuesday and Friday evenings for Males, Thursday afternoon for Females.

The work is increasing in importance and numbers; enquiries relevant to these diseases by letter and personally to me at the Council house are also increasing, such matters receive my personal attention, and every effort is made to preserve strict privacy in connection therewith.

The statistics furnished by Dr. Stuart are as under:

The number of persons receiving treatment for first time in 1918 may be classified.

_				
Totals	73	34	107	15 12 27
Syphillis & Gonorrhœa	1		1	M. F. Total.
Gonorrhœa only	31	6	37	Conditions other than Venereal Disease.
Syphillis only	41	28	69	
	M.	F.	Totals.	

There were already receiving treatment on January 1st, 1918 for Syphilis, 14 males, 12 females; Gonorrhæa, 8 males only; other than Venereal Disease, 1; Total 35.

Total number of persons who received treatment was 169, and the attendances at out-patient clinic 1,234, of which 911 were males and 323 females.

The aggregate number of "in-patient" days, 342.

The results may be analysed as follows:—

	Syph	illıs.	Gonor	rhœa.
	M.	F.	М.	F.
Ceased to attend without completing treatment	31	34	15	1
Discharged from out-patient after completion of treatment for	2		14	3

There were no cases of soft chancre seen throughout the year.

Residential areas of patients were:

		Walsall.	County of Stafford.
Syphilis		57	13
Gonorrhœa		25	13
Conditions of other Venereal	th a n 	15	12
Total		97	38
			-

For Gonococci 71 specimens were examined by Dr. Stuart.

For Wasserman re-action 67 specimens were subunited to Birmingham University.

TABLE I.

Walsall County Borough.—WHOLE DISTRICT INFANT MORTALITY DURING THE YEAR 1918.

Nett Deaths from stated Causes at various Ages under One Year of Age.

CAUSES OF DEATH.	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1 & un. 3 mths.	3 & un. 6 mths.	6 & un. 9 mths		Total deaths under One Year.
ALL CAUSES—Certified Uncertified	56	6	10	4	76 	34	32	41	39	222
Small-pox Chicken-pox Measles Scarlet Fever Whooping Cough Diphtheria and Croup								 1 4	 3 7	 4 14
Erysipelas	• • •		•••					• • •		
Abdominal Tuberculosis Other Tuberculous Diseases	• • •		• • •	• • •		•••	1	2		3
Meningitis (not Tuberculous) Convulsions			2	1		2	1 2	1	•••	2 9
Laryngitis Bronchitis Pneumonia (all forms) { Diarrhœa Enteritis	•••	•••	1		1 	 4 3 2 3	3 7 	6 11 1	6 8 2 4	20 29 5 20
Gastritis Syphilis Rickets Suffocation, overlying	1				1	5		1		 7
Injury at Birth Atelectasis	3	•••	1		4		1			5
Congenital Malformations Premature Birth Atrophy, Debility,	1 20	5	2 2	1	8 47		1			8 52
and Marasmus Other causes			1	1	7 1	5 5	6	3 7	9	21 23
Totals	56	6	10	4	76	34	32	41	39	222

Nett Births in the year—legitimate, 1,962; illegitimate, 83. Nett Deaths in the year of legitimate infants, 200; illegitimate infants, 22.

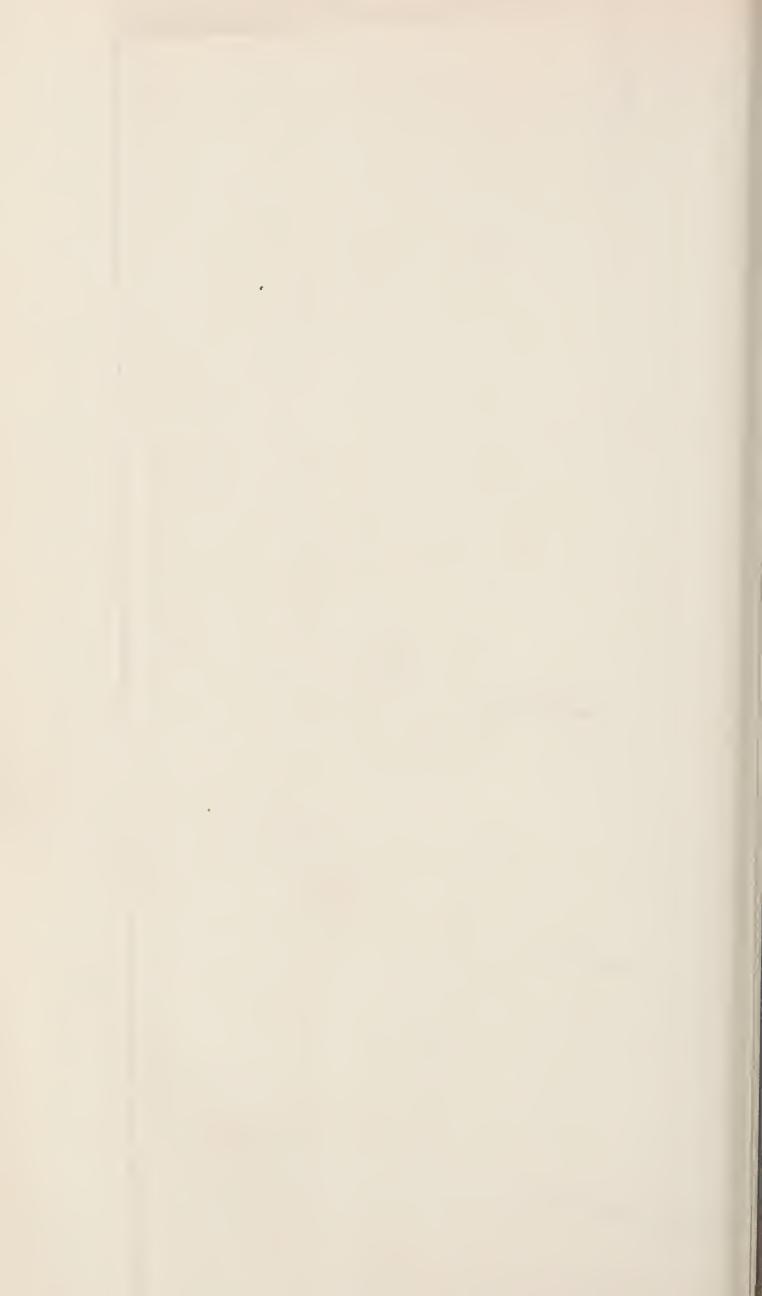


TABLE III.

Causes of Death at different periods of Life in Walsall County Borough, 1918,

As furnished by the Registrar-General.

Causes of Death.	Sex.	All Ages.	0	1-	2-	5-	15-	25-	45-	65-
ALL CAUSES 1 Enteric Fever 2 Small-pox 3 Measles 4 Scarlet Fever 5 Whooping Cough 6 Diphtheria and Croup 7 Influenza	M F M F M F M F M F M F M F M F M F M F	934 854 1 - 1 - 1 - 1 - 1 - 1 - 1 1 - 1 2 1 1 2 1 2 1 1 1 1 2 1 2 2 2 3 2 2 3 2 3 2	116 108 	57 58 	72 68 	56 64 1 2 32 4 1 1 2 1 1 2 1 1 2 1 2 1 2 2 1 2 2 3 4 2 2 2 3 4 2 2 2 3 4 2 2 4 2 2 3 4 2 2 4 2 2 4 2 2 3 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4	44 73 - 19 36 - 19 36 - 1 2 1 2 1 2 1 4 - - 1 4 - <td>141 153 1 1 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 2 3 2 3 4 1 2 3 4</td> <td>224 162 - - 33 26 - - 33 26 - - 33 26 -</td> <td>224 168</td>	141 153 1 1 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 2 3 2 3 4 1 2 3 4	224 162 - - 33 26 - - 33 26 - - 33 26 -	224 168

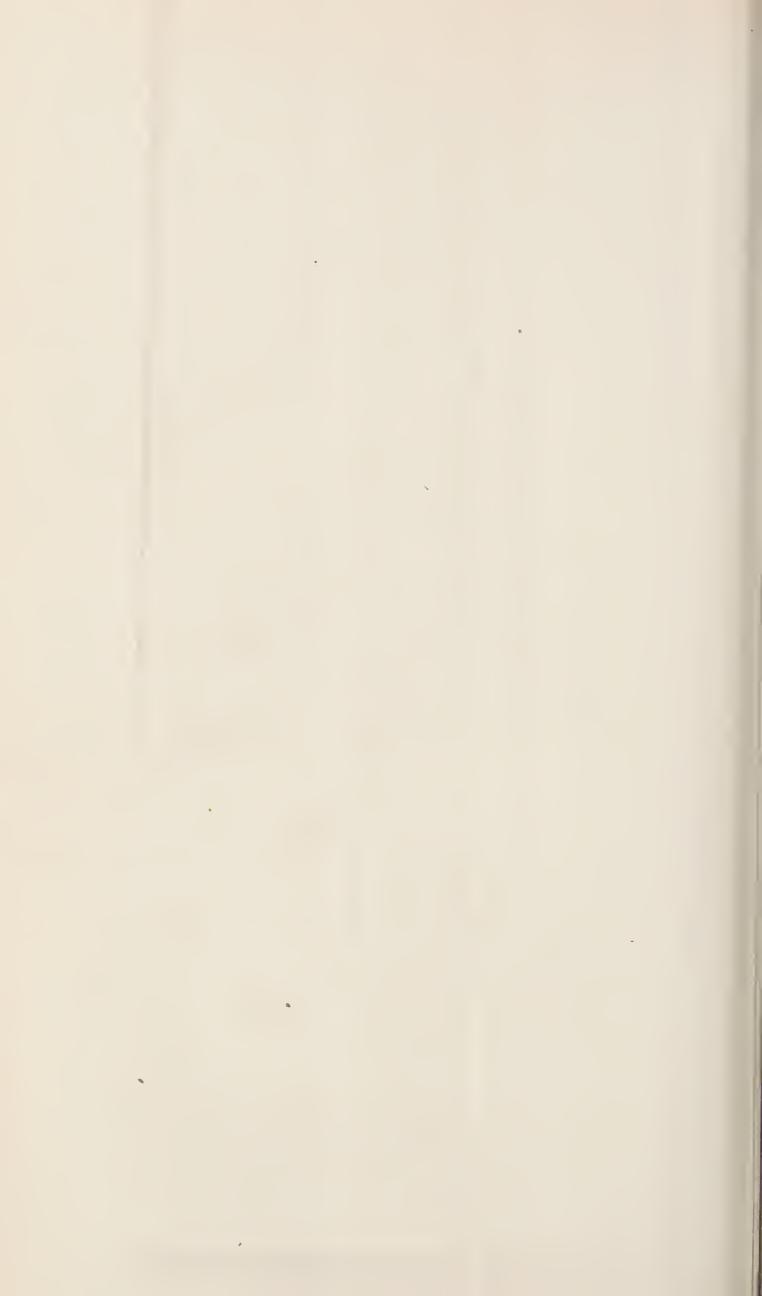


TABLE IV.

WALSALL COUNTY BOROUGH.

Causes of, and Ages at Death during the Year 1918.

	Death whet	s at ther	the soccu	rring D	med with istric	in o t.	r wit	hout	10	Nett Deaths at all Ages of "Residents" belonging to Localities, whether occurring in or beyond							her of "Resi- esidents" in ons in the t.		
Causes of Death	All Ages	Under 1 year.	1 and under 2	2 and under 5	5 and under 15 vears	15 and under 25 vears	25 and under 45	45 and under 65	65 and upwards	Bloxwich	Leamore	Birchills	Hatherton	Paddock	Bridge	Pleck	Caldmore	Workhouse	Total Deaths wheth dents" or "Non-R Public Instituti
Enteric Fever	3					1	1	1		<u> </u>	•••	1	1)			1		
Small-pox Measles	23	4	9	8	2		•••			1	1	4	5	3	3	4	2	•••	
Scarlet Fever	• • •	•••					•••			<u>.</u>							•••		•••
Whooping-cough Diphtheria and Croup	48 12	14	15	13 6	5 5	1				5	5	8	2 2	4	3	10	8 2	•••	3
nfluenza	354	12	14	42	36	57	117	56	20	35	54	73	47	22	29	50	40	4	25
Phthisis (Pulmonary	1	•••	•••	•••	•••	•••	•••	•••			•••	•••	•••	•••		•••	•••	•••	•••
Tuberculosis) [uberculous Meningitis]	131 10	3	1	2	8	27	61	30	2	5	21	23	10	12	15	23	22	• • •	22
Other Tuberculous;			•	1	4	• • • •	•••	1	•••	2				2		4	•••	•••	2
diseases Cancer, malignant	21	•••	•••	4	7	4	3	3	• • •	2	4	1	3	4	2	3	2		9
disease	89		•••		•••	1	2	58	28	7	12	!1	7	8	13	12	16	3	24
Cheumatic Fever Meningitis	5 6	2	2	1 1	1 1	1	1	1		2	•••	1 1	1	2	1 1	1	•••		1
Organic Heart Disease	103				6	5	9	48	35	7	16	16	13	10	12	16	13		14
Bronchitis Pneumonia (all forms)	123 232	20 29	8 40	38	20	8	10 39	33	19	6 22	12 29	50	15 23	12 21	16 29	18	20 25	2	21
Other diseases of Res-										22	20	1				00	2.5	• • •	
piratory organs Diarrhœa and Enteritis	31 39	5 24	5	3 2	4		3 2	11 3	4 2	1 2	\ \ 1 \ \ 3 \ \ \ 3 \ \ \ \ \ \ \ \ \ \	5 8	6	5 2	2 5	4 2	7 7	• • •	2 4
Appendicitis and		2.			•					2				2				••	
Typhlitis;	3 5	• • •	•••		1	2	1	4	• • • •	•••	•••	• • •	1	1 2		1	1	•••	1
Alcoholism	•••	•••				•••				•••	•••	•••	•••	• • • •		• • •	•••	•••	•••
Vephritis and Bright's Disease	28		4	2	1	4	4	8	6	4	4	4	5	2	3	3	3		2
Puerperal Fever	2	•••	•••			1	1				•••	•••	1	•••			1	•••	
Other accidents and Diseases of pregnancy)														The state of the s				
and parturition	8	• • •	• • •	•••	•••	2	5	1		1	2	1	2	•••	1		1	•••	•••
Congenital Debility & Malformation, in-																	i		
cluding Premature																			
Birth iolent Deaths, ex-	82	80	2	• • •	• • •	• • •	•••		•••	7	10	16	9	12	6	11	11	•••	8
cluding Suicide	41		1	3	6	5	6	9	11	5	1	4	5	7	10	4	12	• • •	31
nicides ther defined diseases 3	10	29	10	10	1 5	2 7	3 24	2 75	2	1 26	 56	2 62	1 42	3 29	1 53	1 55	1	•••	104
iseases ill-defined or		20	10	10			2.1	73	21/	20	00	UZ	72	29	55	55	48	6	124
unknown	•••		• • •	•••	•••	•••	• • •	• • •	• • •		• • •	•••	•••	• • •	• • •	•••	• • •	•••	•••
All causes 17	787	222	114	140	115	130	292	383	391	142	232	313	214	170	202	256	243	15	314



Table V.
WALSALL COUNTY BOROUGH.

VItal Statistics of whole district during 1918 and previous years.

	Popula-	BIRTHS.			Regis	ncica	Transferab	le Deaths	Ni		S BELONGIN ISTRICT.	G TO
Vn.n	tion estimated	ed	NETT.		in the District.		of Nov		Under 1 Year of Age		At all Ages	
YEAR	to Middle of each Year	Uncorrected Number.	Number	Rate	Number	Rate	of Non- residents registered in the District.	of Residents not registered in the District	Number	Rate per 1,000 Nett Births	Number	Rate
1	2	3	4	5	6	7	8	9	10	11	12	13
1912	92,868	2732	2727	29 ·36	1421	15.30	35	48	359	131.64	1434	15.44
1913	93,477	2800	2786	29.80	1592	17.03	43	55	439	156·75	1604	17·15
1914	94,093	2771	2769	29.42	1383	14.69	43	73	321	115.92	1413	15.01
1915	94,093	2566	2561	27.22	1596	16•96	61	62	381	149.06	1597	16.97
1916	Birth 97,384		2510	25.82	1451	16.21	58	73	282	112·12	1466	16:38
1917	Death 89,506 Birth 98,047 Death 87,957	2152	2149	21.94	1398	15.89	54	. 60	238	110.59	1404	15.96
1918	(Birth) 98,192 (Death 87,635	2033	2035	20.72	1735	19:95	54	89	222	110:55	1787	20.39

Area of District in Acres (exclusive of area covered by water)

... 7483

Total population at all ages

92,115

Total families or separate occupiers ... 18,943

Table of deaths of infants under one year, with the rate per thousand births during the last ten years, and deaths between I and 5 years.

Year	No. of Deaths under 1 year.	Rate per 1000 Births	No. of Deaths 1 to 5 years.
1908 1909 1910 1911 1912 1913 1914 1915 1916	427 382 313 424 359 439 321 381 282 238	147.80 136.80 114.77 152.08 131.64 156.75 115.92 149.06 112.12 110.59	186 174 103 146 187 249 141 241 130 189
Average for 10 years	356 222	132 [.] 75	173 254

Tuberculosis.

Number of cases of Pulmonary Tuberculosis notified in each locality with deaths taking place.

	Bloxwich.	Leamore.	Birchills.	Hatherton.	Paddock.	Bridge.	Pleck.	Caldmore,	Walsall Workhouse.	Walsall General Hospital.	Total.
Cases notified Deaths	14	31 21	35 23	27 10	22	17	36 23	26 22	4	I	213

^{*}Deaths in Workhouse are allocated to the Wards

Health Visitor's Report.

Birth visits distributed as follows:--

	Bloxwich.	Leamore.	Birchills.	Hatherton.	Paddock.	Bridge.	Pleck.	Caldmore.	Total.
Ist Visit Re-Visit Total	s 727	527	602	470	193	192	442	226	3499

When first visited, 1556 of the infants were breast fed, and 211 bottle fed, altogether or in part. Of the children who received a second or subsequent visit, a further 345 were found to be bottle fed, making a total of 556 infants who are known to have been artificially fed.

Attendances at Welfare Centre.

The total attendances at the Centres being 8,044, for the 12 months, of which number 2,422 were medically examined, the ages being as follows:—

		der onths		12 ihs	ı- yr								New Cases
Milton S StaffordS AblwellS ———— Total	388 t 617	1805 903	193 296 106	729 853 567	120 110 74	364 479 456	48 101 49	134 285 187	3 34 15	97 46	752 1158 512	A. 2364 3519 2161	201 412 161

^{*}M-Number Medically Examined. A Number Attendances.

Health Visitors' Record of Visits.

Birth Visits.	Mid- wives' Visits.	lnquests	Other Visits.	Visits re death of child.	Total Visits.
5194	81	I	564	2	5842

Birth Enquiry.

				birth	Un-noti- fied birth enquiry.	Diarr-
1605	3499	54	2 56	37		42

Midwives' Visits, &c.

						Sanitary Defects reported.
81	57	24	2	138	2	27

Midwives' Notification.

1				
NAME AND ADDRESS OF THE OWNER, TH	Medical help	Still-birth.	Death of Child	Ophthalmia.
1	104	33	2	15

The causes of sending for Medical help are as follows:

Mother.		Child.	
Previous abnormal pregnancy Abnormal ,, Complicated Labour ,, Lying in Rise of Temperature	5 4 35 - 9	Dangerous Feebleness and Prematurity. Inflamation of Eyes Malformation or De- formity	28 15
Total	53	Total	5 I

MARY E. HUGHES,

Superintendent Health Visitor.

TABLE VI.

WALSALL COUNTY BOROUGH.

RETURN of the Number of Cases of Infectious Disease reported to the Medical Officer of Health during the year 1918 and of Deaths from the Diseases notified.

				Cases notified	Deathsregistered
Small-pox	•••				
Cholera, Plague			• • •	•••	•••
Diphtheria (includir	ig Membra	anous Cro	oup)	69	12
Erysipelas	•••	•••		49	1
Measles .	•••	•••	• •	880 .	23
Scarlet Fever	•••	•••		152	•••
Typhus Fever	•••	•••		1	1
Enteric Fever	•••			4 `	3
Relapsing Fever or	Continued	Fever			
Puesperal Fever	•••	•••		3	2
Cerebro-Spinal Mer	ningitis	•••	• • •	1	1
Poliomyelitis		•••		1	
Pulmonary Tubercu		•••		213	131
Other Forms of Tu	berculosis	•••		34	31
Ophthalmia Neonat	torum	•••	• • •	23	

WALSALL COUNTY BOROUGH.

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Cases of Infectious Disease Notified during the Year 1918.
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	1001	Total cases removed to Hospital.					1		: 0	1	:	-1	· ·	•	•			•	• •	13
lity	Uslsall General Hospital			:		*	' ;	:		:	: *	٠			:	:	:	: -	· :	.3
Total Cases Notified in each Locality	Walsall Workhouse		:	:		:	-1-	. ;							:		:	: 1	• :	∞
	Caldmore Ward ∞		:	:		10	4	219	1	. ;	,-	(-	4		:	26	0 01	297
	Pleck Ward		:	:		:	S	103	27								~	36	9	180
	Pridge Ward			:		3	Ŋ	79	4		-		:				~	17	,	123
	Paddock Ward or		:	:		50	9	1113	20	:	:		:			:	9	22	3	190
ies 1	Hatherton Ward +			:				8 52	13		:		:				4	27	C.1	227 114 190 123 180 297
Cas	Birchills Ward			:		110	3	8 158	15	:			:			:	4	35) (1 227
otal	Leamore Ward		\ .	:					18	:	:		:		-	:	3	31	00	194
I	H Pa	upwards Bloxwich Wa	-	•	Out (all a	p(38	p(:				N. TERRORIES			dicary in pla			194
Cases Notified in whole District	At Ages—Years.	bas 20	:	:		:	3		:	:	-					:	:	<i>C</i> 3	:	5
		59 01 54	:	:			21	:	:	-	:		:	:	:	:	:	37	7	62
		25 to 45	:	:		9	16	4	3	:			:	-	:	:	:	66	<u>۳</u>	133
		15 to 25	:	:		ıΩ	~	6	15	:			:	C1	:	:	:	45	3	83
		21 of 2	:	:		53	C 1	373	103	:	C 1		:	:	:	:	:	25	20	554
		¿ oʻi [:	:		27	4	452	27	:	:		:	:	:	:	:	5	4	519
ases		Under 1	:	:			:	42	4	:	:		:	:	_		23	:	C1	74
	sagh Ils 1A		:	:		69	49	880	152		4		:	3	_	-	23	213	34	1430
			*	:	sno			: :		:	:	***		:		:		.: 01		
Notifiable Disease.				Cholera (C) Plague (P)	Diphtheria (including Membranous	Croup)	Erysipelas	Measles	Scarlet Fever	Typhus Fever	Enteric Fever	Relapsing Fever (R)	Continued Fever (C)	Puerperal Fever	Cerebro-spinal Meningitis	Poliomyelitis	Ophthalmia Neonatorum	Pulmonary Tuberculosis	Other forms of Tuberculosis	Totals

Isolation Hospitals:—Enteric Fever Hospital, Hospital St., Walsall; Small-pox Hospital, Sneyd Lane, Bloxwich Diphtheria cases are treated at Walsall General Hospital; Walsall, a retaining fee of £20 per quarter is paid to the Executive Committee.

* The Diphtheria Case and the Enteric Case notified in the Walsall General Hospital were imported cases.

BIRTH-RATE, DEATH-RATE AND ANALYSIS OF MORTALITY during the Year 1918,

As furnished by the Registrar General.

Table showing Death-rates, &c. in Walsall, as compared with England and Wales, 96 Great Towns,

148 Smaller Towns and London.

	Cause of Death.	6.1	8.0	0.5
OF 4S.*	Uncertified			
NTAGE Death	Inquest Cases.	5.4	2.8	3.9 7.3 6.3
PERCENTAGE TOTAL DEATH	Certified Causes.	93.3	93.4	94.5 92.5 93.6
P _F	Deaths in Fublic Institutions.	24.3	28.4	15.4 45.0 17.5
RATE PER 000 BIRTHS	Total Deaths under one year.	97	106	94 107 110
KATE 1,000 B	Diarrhæa and Enterisis (under 2 years).	10.99	14 46	9.73
Z	Violence.	0.49	0.49	0.38 0.56 0.46
CIVILIAN	Diphtheria.	0.14	0.15	0·17 0·17 0·13
1,000	Vhooping Cough.	0.29	0.34	0.25 0.43 0.54
E PER ATION.	Scarlet Fever.	0.03	0.04	0.03
ANNUAL DEATH-RATE PER POPULATION.	Measles,	0.58	98.0	0.25 0.42 0.26
DEAT	Small-pox.	00 0	00.0	
NNUAL	Enteric Fever.	0.03	0.03	0.03 0.02 0.03
Ą	All Causes.	9.21	18.2	16.1 18.9 19.95
	BIRTH-RATE P 1,000 TOTAI	17.7	17 6	17.9 16.1 21 46
		England and Wales	96 Great Towns, including London (Census Populations exceeding 50,000)	148 Smaller Towns (Census Populations 20,000—50,000) London Walsall

*Non-civilians are included in these figures for England and Wales but not for other areas.

INSPECTOR OF NUISANCES RETURN OF VISITS, &c.

Dr. H. SHORE,

Medical Officer of Health, WALSALL.

Dear Sir,

In accordance with the provisions of the Sanitary Officers (outside London) Order 1910, I herewith furnish you with a tabular statement containing the following particulars for the year ended December 31st, 1918.

1. The Number and Nature of Inspections made by the Sanitary Inspectors.

	No. 1 District.	No.2 District.	No. 3 District.	Total.
Inspections of Dwelling-houses (8	6	17	31
District Inspections (Inspections of Workshops (not in-	3430	3940	3385	10755
cluding Bakehouses)	21 14	I	33	55
,, Homes of Outworkers	56	95 133	21 110	130 2 99
,, Slaughter-houses ,, Bakehouses	673 55	504 93	774 39	1951 187
,, Fishyards ,, Dairies	178	170	33 129	173 477
,. Houses let in Lodgings Samples of water	184	198		382
Samples under the Sale of Food and Drugs Acts	44	47	30	121
			/	
Canal Boat Inspections Visits to infected houses	893	 1164	740	8 2797
Fumigations after notifiable	132	157	135	424
Drain tests Re-inspections of work for abate-	21	33	24	78
ment of Nuisances	2085	2326	1533	5944
Total visits and Inspections	7934	8868	7003	23813

2. The Number of Notices Served during the Year.

	No. 1 District.	No. 2 District.	No. 3 District.	Total.
	453 120	545 183	434	143 2 417

3. Result of Services of such Notices.

		No. 1 District.	No. 2 District	No. 3 District.	Total.
Number of nuisances abated	• • •	470	614	558	1642
Notices not complied with		54	49	56	159

Yours obediently,

ARTHUR T. HUBBLE,

January 31st, 1919.

Inspector of Nuisances.

School Medical Report

for the year ended 31st December, 1918.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

The Annual Report for the year ending December 31st, 1918 is submitted.

The duties during the past years have been carried out by the following, viz.: 1st, Dr. Davis; 2nd, Dr. Hilton; 3rd, Dr. Mand Bennett; Dr. Duncan and the School Medical Officer.

Owing to those unavoidable changes coupled with the prevalence of a severe epidemic of influenza, necessitating the closure of the Schools under the jurisdiction of the Walsall Education Committee, the work was considerably hampered, which accounts for the somewhat meagre report submitted.

During the routine inspection of your several Schools including the children in attendance, the hygienic conditions were found satisfactory with only one or two exceptions.

Cases of Scabies were found to be on the increase, possibly due in a few instances to the disease being carried to the homes by soldiers returning from the front on leave. Nearly all of them, whether mild or severe, were sent to the Bradford Street Clinic for treatment.

Other infections such as Impetigo, Ringworm, Yerminous and Dirty Heads and Bodies, were dealt with in a similar manner.

Cases of Tuberculosis, either in the incipient or more advanced stage were referred for treatment at the Tuberculosis Dispensary.

Enlarged Tonsils and Adenoids; Cases when removal was found to be absolutely necessary were each given a printed card to Dr. Sydenham entitling the recipient to Surgical Treatment.

Otorrhæa and Deafness; nearly all cases were treated at the Clinic in the ordinary way, and at the School inspection the whisper test is applied.

Errors of Refraction and Ophthalmic Cases of which there were not a few, were also treated at the Bradford Street Clinic.

The reports from the School Dentist (Mr. Grove), School Nurses and that for the Provision of Meals to Children will be found appended.

We wish to tender our sincere thanks to your Secretary Mr. Hibbett), the School Nurses, particularly Sister Margaret, the teachers of the various Schools and your Chief Attendance Officer, for their courtesy and kind assistance.

HARRY SHORE, M.D.,

School Medical Officer.

GEORGE DUNCAN,

Acting School Medical Inspector.

TABLE I. NUMBER OF CHILDREN INSPECTED 1st JANUARY, 1918 TO 31st DECEMBER, 1918.

A. "CODE" GROUPS.

		Entrants.					
Age.	3	4	5	6	Other Ages.	Total	
Boys Girls	5 years is earliest age for Entrants		600 525	639 625	- 	1239 1150	
Totals		-	1125	1264		2389	

	Intermediate Group.	e Leav	ers.				
Age.	8	12	13	14	Other Ages	Total	Grand Total.
Boys Girls	438 343	565 544		. —		1003 887	2242 2037
Totals	781	1109			_	1890	4279

B. GROUPS OTHER THAN "CODE."

1		Intermediate Group (other than 8 years).	Special Cases.	Re-Examinations (i.e, No. of Childr'n Re-Examined. 4
Boys Girls	• • •		742 531	1890
Totals	•••	_	1273	1890

37

TABLE II. RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION IN 1918.

(Code	Groups.	Spe	cials.
Defect or Disease.	Number referred for Treatment.	Number requiring to be kept under observation but not referred for Treatment.	Number referred for Treatment.	Number requiring to be kept under observation but not referred for Treatment.
11 1	40	56	2	7
Uncleanliness	40	30	-	1
Head	442	22	17	
Body Ringworm	18	3	9	-
Skin Head	73		18	
Body	73 6	4		
Scables Impetigo	90	41	27 11	6
Other Disease	17 53	41 89	6	7
Eyes Defective Vision & Squint External Eye Disease	389 2 6	2 09 66	119	78 11
	20		13	•
Ear Detective Hearing Ear Disease	89	113	14	10
	163	24	13	5
Teeth Dental Disease	5012			
Nose / Enlarged Tonsils	341			
Adenoids	147		-	
Throat Enlarged Tonsils and		•		
Adenoids Defective Speech	615 6	13	3	4
neart Disease	O	13	3	+
Organic Circu- Functional		14	1	22
lotion Anamia	63 126	39	19	15 44
Pulmonary Tuberculosis			• 9	77
Definite	4		4	
Suspected	59 572	64	27	14
Other Disease	29	122	1	4
Nerious Frilance				2
Joan (Chorea	16 6	12 4	-	3 4
- Pulmonary Luberculs	O O	4		T
Glands	18		7	
Bones and Joints Other Forms	3	4	2 2	$\frac{1}{2}$
Rickets	108	77	_	14
Deformities Other Defects or Diseases	16	21	1	
Defects of Diseases	240	38	12	23

Teeth.

We regret being unable to give a correct statement of the number of children suffering from defective teeth during the year 1918, a record only of the number of decayed teeth having been kept. This number amounted to 5,112. The mistake arose from a misapprehension as to the information required.

TABLE IV. TREATMENT OF DEFECTS OF CHILDREN DURING 1918.

Condition.			tment red	of defects for which report is available.	of defects treated.		esults eatme		of defects not treated.	Percentage of defects treated.
	From previous year.	New *	T'otal.	No. of defect no report is	No. of def	Remedied.	Improved.	Unchang'd	No. of d	Percentag
Clothing Footwear Cleanliness of head Cleanliness of body Nutrition Nose and Throat Ext'nal eye disease Ear disease Teeth Heart & circulation Lungs Nervous sytem Skin Rickets Deformities Tuberculosis, non- pulmonary Speech Mental condition Vision and squint Hearing Miscellaneous		759 694 346 22 128 847 116 196 - 92 588 27 77 149 31 27 4 19 439 95 388	346 22 128 847 116	 31 141 71	62 84 23 11 3	254 15 16 245 30 57 	33 26 21 	55 221 34 14 - 4 25 6 20 61 3	104 115 44 8 15 101 41 60 24 51 8 18 44 5 136 31 122	18·7 14·2 76·8 77·2 17·1 32·3 42·2 39·2 29·5 16·8 62·9 80·5 56·3 74·1 40·7 75·0 42·1 17·2 62·1 26·03
Total		10106	10106	1647	1518	1267	521	288	939	15.02

^{*} The return should show comprehensively all defects found during the year, from whatever source derived, which required treatment.

Clothing and Footwear Table for the Year 1918

Number examined 3474.

	ENT	RANTS.	INT	CERM	IEDIA	ATE.		LEA	VERS	
	Boys Girls	Total Per cent.		Girls		Per cent.	Boys	Girls	Total	Per cent.
Cood Good Fair Poor	716 474 144 136	, ,	361 41	255		12.4	563 380 98 85	383	1121 763 127 121	11.3
Footwear Good Fair Poor	157 59	1302 79.8 216 10.6 112 6.8	56	48	104	75.6 6.3 4.4	7 I	348 64 106	808 135 138	12'04

In giving a detailed statement of the clothing and foot-wear report, it is pleasing to say that matters in that direction were observed to be more favourable, and that the children in nearly all the areas inspected were generally cleaner, better clothed and better shod, shewing that the parents are taking a greater interest in the personal appearance and comfort of the little ones. The improvement is in no small measure due to the care and kindly advice vouchsafed to the mothers or guardians by the School Nurses, whose labours are so ungrudgingly given at all times.

DURING 1918

	The total number of children medically inspected (whether Code Group, special or ailing child)	4279
C. 4	The number of children in (1) suffering from defects (other than uncleanliness or defective clothing or footgear) who require to be kept under observation (but not referred for treatment)	1224
	The number of children in (1) who were referred fo treatment (excluding uncleanliness, defective clothing, &c.)	984
4	The number of children in (3) who received treatment for one or more defects (excluding uncleanliness, defective clothing, &c.)	2018

TABLE III. NUMERICAL RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA IN 1918.

			Boys	Girls	Total
(inch	Blind. Iding partially blind)	Attending Public Elementary Sch'ls Attending Certified Schools for the Blind Not at School	4 1	3	7
	f and Dumb. Iding partially deaf).	Attending Public Elementary Sch'ls Attending Certified Schools for the Deaf Not at School		6	11
Mentally Deficient.	Feeble Minded .	Attending Public Elementary Sch'ls Attending Certified Schools for Mentally Defective Children Notified to the Local (Control) Authority during the Year Not at School			
Mental		At School Not at School			
	Idiots.				
F	Epileptics.	Attending Public Elementary Sch'ls Attending Certified Schools for Epileptics Not at School	1 1 I I	_ _ 6	117
ive.	Pulmonary Tuberculosis.			6	 17
Physically Defective.	Other forms of Tuberculosis.	Attending Public Elementary Sch'ls Attending Certified Schools for Physically Defective Children Not at School	1 3	2 5	3 8
Phys	other than Tubercular.	Attending Public Elementary Sch'ls Attending Certified Schools for Physically Defective Children Not at School			7
* Dull		Retarded 2 y ears Retarded 3 y ears	1	2 I	3

^{*} Judged according to age and standard.

Provision of Meals for the Year 1918.

Number	of Breakfasts	provided	•••	•••	8256
1,	Dinners	,,	•••	•••	8216
					16472
					AND DESCRIPTION OF THE PERSON NAMED IN
Total nu	mber of indivi	idual childre	en fed		60

Towards the end of the year, there was a considerable falling off in the attendance, due to the Influenza Epidemic. With the passing of the Epidemic, the attendance reached its former level.

Returns of the School Nurses for 1918.

District.		Children seen	Notes to parents.	Dressings.	Home Visits.	Days with S. M. L.	Days with Dentist.	Days in Clinic.	Days in Office.
N. Walsall S. Walsall Bloxw.ch	• • •	14071 14700 11077	1181 1279 579	171	34I 366 360	36½ 39 28	$ \begin{array}{c} 10 \\ 30 \\ 35^{\frac{1}{2}} \end{array} $	41 38 54	7 9

Children operated on by Dr. Sydenham for enlarged Tonsils and Adenoids during 1918 were 121.

ANNUAL REPORT

OF THE

SCHOOL DENTIST

For the Year ended 31st December, 1918.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting my Annual Report on the working of your Dental Clinic.

Your Committee would be well advised to sanction daily Tooth Brush drill in the Schools, under the supervision of members of the Teaching Staff.

To arrange for talks to the children about the importance of cleanliness in their mouths and to make use at the same of a series of charts issued by the School Dentist's Society.

There can be no greater defence against Tuberculosis than the possession of a healthy mouth.

No department of Public Health would render so large a return for money expended as the School Clinic, with a thorough system of treating children's teeth.

I cannot too strongly urge upon your Committee, the carrying out of your Walsall Dental Scheme already sanctioned by the Board of Education, or the alternative of engaging an adequate staff of Dentists.

Now that hostilities have ceased, the numerous improvements suggested from time to time should, in my opinion be carried out.

Children examined and Charted in the Schools.	Children Treated.	Temporary Teeth Extracted	Permanent Teeth Extracted.	Local Anæsthetics.	Scaling.	Dressings.	Fillings.	Casuals.
1550	2243	2517	300	2817	4	2093	623	693

The Dental Clinic was closed 13 weeks for Holidays and Epidemic.

(Signed) H. N. GROVE, L.D.S., School Dentist.

Fourth Annual Report

OF THE

Tuberculosis Officer

For the Year 1918.

Tuberculosis Dispensary,
3 St. Paul's Close,
Walsall.

To the Chairman and Members of the Tuberculosis Sub-Committee, County Borough of Walsall.

MR. CHAIRMAN AND GENTLEMEN,

I have the honour to present to you the Fourth Annual Report on the Anti-Tuberculosis work in Walsall during the year 1918.

In the continued absence of Dr. Clark with the Colours, the work of the Dispensary has been carried on by Drs. Fox, Layton, Martin and myself; my colleagues being responsible for the clinics on Tuesday, Wednesday and Friday afternoons, and myself for the usual Thursday evening one. In addition the Tuberculosis nurses attend on Monday afternoons to see sundry cases not necessarily requiring to see a Doctor on the particular occasion in question.

The compilation of the statistical work has fallen upon the Secretary-dispenser (Miss Squire) to whom my heartiest thanks are herewith tendered.

I am, Mr. Chairman and Gentlemen, Your obedieut servant,

HARRY SHORE,

Acting Tuberculosis Officer.

PART I

Progress of the Anti-Tuberculosis Work in Walsall.

I. GENERAL SURVEY.

The notifications of both the Pulmonary and the Non-Pulmonary forms of Tuberculosis during the past year show a decline as compared with the previous year, there being notified 213 cases of Pulmonary Tuberculosis, as compared with 230 cases in 1917, and 34 cases of Non-Pulmonary Tuberculosis, as compared with 66.

A table showing the age and sex of the cases notified has been prepared and is shown here—Table I,

There has to be recorded a decrease in the Mortality from Pulmonary Tuberculosis, 131 deaths being recorded from this cause, as against 134 in 1917; deaths from Other Forms of Tuberculosis also show a decrease, there being 31 deaths recorded during 1918, as against 34 in 1917. Of the total deaths recorded during 1918, 58 cases of Pulmonary and 12 of other Tuberculosis disease were notified for the first time during the year, 36 cases of Pulmonary and 9 of Other Forms dying within 6 weeks of notification.

Table I.
Showing age and sex of all cases notified during 1918.

Age Groups .		0-1	1-5	5-	10- 15	15- 20	20- 25	25- 35	35- •45	45- 55	55- 65	Ab 65	Total.
Pulmonary—Males		_		8	5	5	11	29	29	16	9	2	114
Pulmonary—Females	• • •	_	5	6	6	15	14	19	22	9	3	_	99
Non-Pulmonary—Males	• • •		I	9	5		_	2	_	1	-	_	18
Non-Pulmonary—Females		2	3	4	2	1	2	I	_	_	1	-	16
Total		2	9	27	18	21	27	51	51	26	13	2	247

2. Insured Cases.

The Town Council undertake the Sanatorium treatment of Soldiers and Sailors discharged from the Services suffering from Tuberculosis, and who are recommended for Sanatorium treatment by the Army Council, in conjunction with the Iusurance Commissioners, and the Military Pensions Board.

3. SANATORIUM ACCOMMODATION.

During the year beds have been reserved by the Council at the following Institutions:—

- 1. Devon and Cornwall Sanatorium 2 beds.
- 2. Knightwick Sanatorium .. 10 ,,
- 3. Dean Head Sanatorium .. 3 ,, and 1 extra bed from Feb. 26/18.
- 4. Pelsall Hall Sanatorium .. 22 ,,

Three of the beds at Knightwick were given up March 31st, 1918.

All remaining beds at Devon and Cornwall, Knightwick, and Dean Head were given up December 31st, 1918.

Owing to the beds at Knightwick Sanatorium being required exclusively for the County of Worcester, the Management were reluctantly compelled to terminate our agreement of the use of beds at that Institution.

I feel that I am voicing Dr. Clark's as well as my own opinion, when I state that the patients sent to that Institution have been treated with every consideration there and I consider it my duty to publicly record my extreme appreciation of the same.

Owing to this notice to terminate the arrangements, the Committee, after consideration of all the circumstances of the situation ultimately embarked upon the Pelsall Hall Sanatorium Scheme.

The Institution was formerly opened by Stephen Walsh, Esq., M.P., Parliamentary Secretary, Local Government Board, on October 23rd, 1918.

The first patients were admitted on November 11th, 1918 and before the end of the year 17 beds were in use.

Dr. Martin was appointed acting Medical Superintendent, his report is at the end of this report.

REPORT OF THE TUBERCULOSIS AFTER-CARE COMMITTEE,

For the Year ending December 31st, 1918.

Pending the formation of the new Committee by the Town Council on the lines indicated in the Local Government Board Circular of April 25th, 1915, the Sub-Committee which was appointed by the present After-Care Committee, has carried on the work.

During the year 1918, 295 cases have been brought before the Sub-Committee for consideration, and grants have been made to 132 cases, amounting in all to the sum of £95, and £20 has been expended in providing extra nourishment for Domiciliary patients.

The Honorary Secretary has made 374 visits in connection with this work.

Types of Patients assisted.

Many cases returning from Sanatorium very much improved in health were assisted until such time as they were able to work full time and provide the extra nourishment which is so essential to maintain the improvement. Other Sanatorium Cases who received grants were persons whose former occupations were unsuitable, or who had no employment awaiting them on their discharge. These cases were helped until comfortably settled.

Patients, who in many instances were able to work quite regularly, received help during temporary break-dows. The majority of these were able to resume their work after a rest of three or four weeks.

A number of children, recommended by the Doctors as requiring a holiday, and whose parents were unable to send them away, were granted £1 each towards a holiday and sent away through the Childrens' Country Holiday Fund. All the children returned home very much better after spending a lovely time in the open air.

The following are typical examples of the cases assisted:-

Number 818

This man received Sanatorium Treatment in 1916, and was able to work regularly until February, 1918, when his work as Warehouseman became a worry to him and as his health became worse, he finally had to give up.

He has 8 children, two have lately commenced work and are earning a little money, while a third is an apprentice. This man received several grants of 5/- a week for a month. He is now working in Birmingham.

Number 436

This patient is a very cheerful little woman who is rather inclined to overtax her strength. Early in the year she became run down and was advised by her Doctor to take a rest from work. To enable her to do this the Committee helped her for a few weeks. She quickly improved and was soon back at her own work.

Number 126

Returned from Sanatorium very much improved. He is a married man with 5 young children all under 9 years of age, and until he was working full time, he also was assisted.

Number 1506

A widow with three boys (one of whom has just started to work). A fourth little boy died of Tuberculosis a short time ago. The woman worked as long as she was strong enough but in the end was compelled to stay at home. Both the mother and little boy, who also attended the Dispensary, were most thankful for the money granted them.

Number 1370

The case of an uninsured man nearly 60 years of age. Only son (married and a soldier) was killed in France in October 1918. Only daughter, a very delicate girl, works in a Warehouse and earns 16/9 per week. Wife not strong enough to work. Patient is quite unable to carry on his small business as a Chain-Burnish Maker.

Number 278

The Widow of a Soldier killed at the Front 3 years ago. Receives a Pension of 21/8 for herself and little girl. Worked for some time as a Postwoman and afterwards on the Tram-Cars but found the work too heavy and eventually gave up all work. Until the Pensions Committee were able to grant her an extra 5/- a week, the After-Care Committee did all they possibly could for her.

Number 37

This man had been unable to work for some years, and his wife went out cleaning while he did his best with the house-work and the children. Was made several grants with which to get milk and other support. He rapidly improved and was soon strong enough to do a little work and is still working while his wife stays at home and now keeps her home and children beautifully clean and fresh.

PART II. The work of the Tuberculosis Dispensary. TABLE II. SUMMARY OF WORK DONE DURING 1918.

	Adults	over 14.	Child'en	
	Males.	Females	3 14	Total.
No. of New Cases applying	138 1941	42 799	70 1555	250 4295
No. of Insured Persons commencing Treatment at Dispensary No. of Insured Persons Re-attending at Dispensary	53	14		67 2116
New Cases taken on at Dispensary Referred to other Institutions New Patients Examined (Round No.) Old Patients Re-examined	48 15 	30 4	51 11 	129 30 250 585
O.A.W. Cases transferred to Dispensary Dispensary Cases transferred to O.A.W	49 50	12	I	61 65
Patients who have ceased attending on their own account Patients who have ceased attending on advice of T.O	I	2	4 31	7 47
Home Visits Tuberculosis Officers { First Visit Re-visits				
Nurse First Visit Re-visits	68 923	36 918	86	190 3658
Special Visits in connection with After Care (paid by Secretary)	169	153	52	374
Patients Discharged after Treatment Apparent Cure Markedly improved	5	2 3	6 25	13 34
Contacts— No. of Infecting Cases No. of Contacts Examined No. of Contacts found Tuberculous No. of Contacts under Observation	5 7 4 3	3 3	11 9 2 6	19 19 6 12
Total Attendances at Dispensary, Old and New Cases	2079	841	1625	4545
Average Weekly Attendance				87.4

Attendances at the Dispensary.

The Dispensary is now open four afternoons and one evening per week. It has not been found possible to set aside a special session for the examination of new cases. It is extremely gratifying to the staff to note the large number of patients discharged from active treatment, who have presented themselves at intervals of three to four months for re-examination. Our object is not to lose sight of patients who have once been under treatment, and our requests that they should come periodically to report themselves have been willingly acceded to.

In the following tables, an analysis of the work is given.

TABLE III

Sex and age constitution of all persons applying for advice or treatment, together with the results of examination as to the presence or absence of Tubercle:—

							de la composition della compos	1			
Age Groups .	•	0-5	5-				25- 35	35- 45		Abv 55	Total No. all ages.
Pulmonary—Definite .	in f		3 2	3	7 8	12	21	23 7	8	I 	77 39
Pulmonary—Suspected	m		9 7		I	2	2	2 I	2	I 	19
Other Forms	m f		1 I 2								I I 2
Non-Tuberculous .	in f	I 2	6	6 5	II	9	12	20	3 I	I 	69
Total		3	50	16	29	31	46	55	17	3	250

In Table IV. Insured persons are dealt with separately.

TABLE IV.

Giving sex and age constitution, with Diagnosis of all Insured Persons examined at the Dispensary:—

		15-20	20-25	25-35	35-45	45-55	Above 55	Total No.
Dulmanary Dativita	m	7	12	21	21	6	1	68
Pulmonary—Definite	<u>t</u>	4	5	6	3	2		20
Dulmanary Sugnacted	m	1	2	2	2	2	1	10
Pulmonary—Suspected	f	1			I			2
Other Forms	m							
Other roths	t							
Non-Tuberculous	m	Il	9	9	18	3	1	51
Non-1 abercalous	f	I		I	1			3
Totals		25	28	39	46	13	3	154

Of the number found to be Non-Tuberculous, 35 were Military Cases sent by the Recruiting Board, and 4 were Ex-Soldiers sent by the Pensions Board.

In the following table, Table V., an analysis is given of the occupations of all persons suffering from Tuberculosis who have attended the Dispensary; and in Table VI, a list of the Schools from which the children have come.

TABLE V.

Analysis of Occupations of 157 Patients suffering from Tuberculosis

At or under School age		40	Iron Worl	ers		4
			Labourers	• • •	•••	5
MALES.			Leather C	utt		2
Aeroplane Worker		1	Mechanics	•••		3
Bobbers	• • •	2	Miner	•••		1
Brown Saddler		1	Motor Dri	vers		2
Caretaker		1	Munition	Workers		3
Chain Burnisher Maker		1	Occupatio	n unknown		6
Curriers	• • •	2	Railway S	ignalman		1
Engine Driver	• • •	1	Slater	• • •	• • •	1
Ex-Soldiers		27	Spur Filer	· · · ·	• • •	1
Farm Labourer		1	Tool Make	ers		2
Fitters	•••	2	Tram Driv	er		1
Hairdresser	•••	1	Traveller	•••		1
Insurance Agents	•••	2	Tube Drav	wer	• • •	1
Iron Casters		5	Wood Tu	ner	• • •	1

TABLE V-continued.

FEMALES	3 .		Munition Worker		6
Aeroplane Worker		1	Nil		2
Brass Worker		1	Sawyers Help		1
Burnisher		1	Shop Assistant		2
Char-women	• •	2	Stitcher	•••	3
Domestic		3	Tailoress		2
House-wife	• • •	8	Teacher		1
Leather Worker		2			

TABLE V.

A List of the Schools from which the children have come.

Ablewell Stre	et	• • •	4	Mount	• • •	•••	1	-
Bloxwich Nat	ional		1	North Walsa	11		2	Spinster,
Butts			2	Palfrey		•••	3	-
Blakenall	• • •	• • •	1	St. Patrick's	•••	• • •	2	-
Croft Street		•••	1	St. Peter's			4	-
Field Street	• • •	• • •	1	Wisemore	• • •	• • •	2	-
Leamore	•••		3	Wolverhampt	on Road	•••	5	-

Home Visits

During the year the Nurses paid 190 first visits, and 3,658 re-visits. A summary of the conditions found in the homes is given in the following tables (Tables VII, VIII, IX). Defects, sanitary or structural, thus discovered, are reported to the Health Department, whilst advice as to the isolation of the patient and instruction in simple health laws is given, both to the patient and his friends. In addition, contacts of advanced cases are sought out, and persuaded to come to the Dispensary for examination or referred to their own Doctor.

Table VII

Home Conditions of 157 Patients visited during 1918:-

Cleanliness and General Aspect of Houses

Dirty.	Fairly Clean.	Clean.	Light.	Moder- ate Light.	Damp.	Close.	Venti-	back to	opeu day &	open	or not
8	28	121	133	24	19	20	149	8	121	28	7_

TABLE VIII

Sleeping Arrangements

	Bed in Living Room.	Separate Bed but others in room		Othe	ers i	n b	ed.	Over- crowding.
37	2		77				34	
		No. ii					t	
		I 2	3 4	I	2	3	4.	
37	2		7 —	59				34

TABLE IX

Size of Houses Visited

	One Ro	omed	Houses	• • •	0
	Two	11		8	
	Three	,,	,,	•••	13
	Four	11	7.7	••	72
	Five	,,	, ,	• • •	37
More than	Five	,,	, ,	• • •	27

Sanatorium Treatment

At the end of 1917 there remained in Sanatoria 9 males and 4 females. During the year 50 males, (including 30 exsoldiers) and 15 females were sent to various Sanatoria. Three men, including 2 ex-soldiers, died. At the end of the year there remained under treatment in Pelsall Hall Sanatorium, 6 ex-soldiers, 5 other males, and 6 females.

In the following table is presented the present condition of all patients who have received Sanatorium Treatment since 1915. It will be observed that over 50 per cent. of all persons treated are working full time.

TABLE X

						Result at end of 1918.								
Immediate Clinical Result on Discharge.				Full time work.		Keeping well, not working		well.		Lost sight of.		Dead.		
		Male I	em.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.	
Disease arrested Much improved Improved In Statu Quo	• • • • • • • • • • • • • • • • • • • •	8 16 12 5	8 3 2 1	7 7 2 —	7 2 1			I I		1 * 1	I -	7 9 5	I I I	
1916 Cases. Disease arrested Much improved Improved In Statu Quo	•••	9 16 12 6	5 3 4 3	9 12 4 3	3 2 1 1		I I		-	2* 2 —	2	1 4 3		
1917 Cases. Disease arrested Much improved Improved In Statu Quo	•••	1 28 15 5	1 7 5 3	1 16 8 —	 4 I I		I I 	 2 6	I I	4 [*] I			I 2 I	
1918 Cases. Disease arrested Much improved Improved In Statu Quo	• • • • • • • • • • • • • • • • • • • •	25 7 4	1 4 3 1	 20 I	 I I	2 2 2 1	3 2	3		 	I 	3 2		

^{*}These figures include 3 patients who are known to have enlisted, their present condition being unknown.

Patients Discharged

TABLE XI

Giving the diagnosis, sex and ages of Patients receiving advice or treatment and discharged during the year ending December 31st, 1918.

Age Groups	1-	-5	5-1	10	10-	15	15-	20	20-	25	25-	35	35-	45	45-		Abc 55		Tot	al s
Sex	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f
Pulmonary Tubercul'sis	I	-	6	11	8	5	8	I	6	2	8	4	4	3	_3	I	I	-	45	27
Other Forms	-		4	2		2	_	I	-		_	1			_			_	4_	6
Totals	I	-	10	13	S	7	S	2	6	2	S	5	4	3	3	I	I	_	49	33

Of that number 39 were insured persons.

Pulmonary Tuberculosis

			Males	. Females.	Children.
1.	Disease arrested		5	-	6
2.	Markedly improved	• • •	6	3	19
3.	Left District		7	4	3
4.	Referred to other Institutions			2	0
5.	Left off attending		1	2	3
6.	Advice only		7	Sent by Rec	ruiting Board
7.	Enlisted		4	-	_

Other Forms

		Males.	Females'	Children.
1.	Disease arrested	 	2	Groups
2.	Markedly improved	 		6
3.	Left off treatment	 		1
4.	Referred to Hospital	 		1

Types of Disease met with and Discharged other than Pulmonary.

				Males.	Females.	Children.
Gland	•••	•••	•••			4
Skin	•••	•••	• • •		_	1
Abdomen	• • •				2	3
	Of this n	umber 2	were Insu	red Pers	ons.	

Domiciliary Treatment

Including those who remained on Domiciliary treatment at the end of 1917, 141 persons in all (107 males and 34 females) were recommended for this form of Sanatorium Benefit during the year. Quarterly Reports as to the condition of the patients under their care, together with recommendations or suggestions as to further treatment, have been received from the various Medical men concerned. At the end of 1918, 56 patients were still receiving this form of treatment.

Deaths

Of the cases coming under observation at the Dispensary since the opening in 1915, 74 cases died during the year 1918, 49 (39 males and 10 females) were Insured persons. The age and sex, constitution and the types of disease are given in the following tables:

TABLE XII.

Age.	0-5		10-15		20-25	25-35	35-45	45-55	Above 55	Total
Males		2	2	3	4	Į I	14	10	1	47
Females	1		2	3	5	7	7		2	27

Types of Disease.

		Males.	Females.
Lungs		42	22
Lungs and Larynx	• • •	—	2
Lungs and Abdomen	• • •	2	1
Cervical Adenitis	2 * * *	-,-	1
Elbow	•••	1	
Generalised	•••	1	1
Spine •		1	

Of these cases, 6 cases of Pulmonary Tuberculosis died within six weeks of coming under observation and notification. Sputum was obtained in 46 of the cases, and was found to contain Tubercle Bacilli in 34.

In 4 cases fatal termination was hastened by Influenza.

TABLE XIII

Occupations of 74 patients dying during 1918.

Children of o	r under Sc	chool			Miners	•••		2
age	•••	••	6		Mopper	• • •		1
Bobbers		•••	3		Motor Driver		• •	1
Brass Dresse	r		1		Munition Wor	rkers		2
Casters	• • •		2		Nil	•••	5 p. p.	4
Clerks	•••	•••	3		Painter	• • •	. • .	1
Currier	•••		1	1	Puddler		• • •	1
Electric Weld	der		1	1	Shop Assistan	t		1
Engineer	• • (• • •	2		Socket Maker			1
Ex-Soldiers	• • •	•••	6	1	Tailoress	•••		1
Filer	• • •		1	N.	Tinsmith	• • •		1
Harness Mak	er		1		Tool Maker	••	• • •	1
House-wives	• • •		13		Tram Conduct	tors		2
Labourers	• • •	• • •	6		Travellers	•••		2
Leather Worl	cers		3		Van Driver	•••		1
Iron Dresser	• • •	• • •	1		Warehouse W	orker		2

Sputum Examinations.

40 positive.

154 negative.

REPORT

OF THE

Acting Medical Superintendent PELSALL HALL SANATORIUM.

I have the honour to report as follows:—Pelsall Hall was opened on October 23rd last as a combined Sanatorium and Hospital for the treatment of Tuberculos, i.e., for the treatment of early and advanced cases of the disease. Patients were first admitted on the 11th of November, delay being due to difficulty in completing the staff.

During the period ending the 31st December, 20 patients were admitted—Males, 14 (Discharged Soldiers 9, Insured Persons 5:: Females 6 (Insured 3, Uninsured 3).

One Discharged Soldier, an advanced case, developed influenza the day he was admitted, from which, I regret to say, he died. Another patient (male) also an advanced case, relapsed badly attendamission and died on the 4th December. One man was discharged in November. Number remaining in the Sanatorium on December 31st., seventeen.

All the early cases are doing remarkably well and if only moper care, treatment and occupation can be given them after they have the sanatorium, the ultimate results in each case promise to very good. Without this care, many of them will relapse, and it then be more difficult to bring back their health to its present will than it has been now. Treatment only begins in a Sanatorium are the jumping-off place for further treatment.

The Hospital cases (advanced) have also on the whole done well. Their prospects have much improved, and with two exceptions all are nowable to get about. For these cases a very prolonged stay in the Sanatorium is necessary if any lasting good to be obtained—a period to be reckoned in some cases, not in recks or months, but years. This is necessary not only in their

own interests, but also in that of their families, because it is by such cases that the disease is spread. In our care of the early cases we are concerned only with treatment, of the advanced cases with the incidence and prevention of the disease as well.

It is as yet too early, and the number of cases under review too small to draw any sweeping conclusions as to the value of Pelsall Hall and its suitability as a Sanatorium. But this much can be said with confidence, that so far the patients have done so well that it is rapidly justifying its existence and I feel sure that when Dr. Clark is able to take over the work there, the results will be a source of gratification to everyone who had any part in its establishment.

The conduct of the patients, with one exception, has been very good.

In the Matron and Assistant Nurse you have two very capable, efficient and tactful officers, with whom I have found it a great pleasure to work. They have worked very hard and successfully and have managed the patients extremely well. A second Assistant-Nurse is joining the staff early next month.

The Sanatorium is now practically full. Yet there are many cases waiting admission and many more who need admission. Meanwhile they are steadily going down-hill and their chances of cure are diminishing. In addition the advanced cases are a continual danger to those with whom they live. The very urgent need is for more beds. We must, if we are to do any lasting good, keep those people in the Sanatorium until the early cases are ready for some form of outdoor employment, though still under treatment, and the advanced cases until at least arrest of their disease occurs and expectoration ceases to contain the poison of tuberculosis. There is, in addition, our responsibility to the Discharged Soldiers for whom we are bound to find accommodation.

To do this, I know well, means a large capital outlay, and greatly increased maintenance charges, but on the other side is suffering, loss of life, loss of working and earning capacity and the continuation of the most fatal of all diseases in Great Britain excepting only pneumonia. To spend less than is necessary to meet the needs of these people is to waste money, to spend wisely but generously will be, I am confident, to save it.

Also, until more beds are provided, there is no accommodation for children. In three consecutive attendances at the Dispensary I have seen thirty-six children, suffering from Tuberculosis, who need Sanatorium treatment with an Open-Air School. In every case an arrest of the disease could be looked. In the meantime they are doing no more than at the best holding their own against a disease which is gravely threatening their future and many of them have had no education for years, indeed, some are totally uneducated.

ANNUAL REPORT

OF THE

INSPECTOR OF NUISANCES

for the Borough of Walsall, for the year ended December 31st, 1918.

To the Chairman and Members of the Health Committee.

Mr. Chairman and Gentlemen,

I herewith submit to you a Report for the year 1918 giving particulars of the work performed under your direction by the Inspectorial Staff of the Health Department.

The year's work has not resulted in any great amount of structural amendment in connection with defective drainage, etc., as will be seen by reference to Table 2. Adverse conditions have necessitated consent to measures of a temporory nature, in lieu of permanent improvements, resulting in a steadily increasing number of partially abated nuisances, which are reducing the standard of general sanitation in each Ward of the Borough. Up to the present (Influenza excepted) there has been no serious outbreak of epidemic diseases, but given the importation of disease, conditions are distinctly favourable to its spread.

Occupier's Nuisances.

About one fourth of the notices issued for nuisance abatement were directed to the occupiers of premises, but in addition, numerous nuisances of a recurring nature, such as (I) deposits or accumulations of offensive refuse, (2) nuisances arising from keeping of animals or poultry in the vicinity of dwelling-houses, (3) neglect in cleansing water closets, drains, or yards used in common, have been dealt with by the Sanitary Inspectors verbally, and of these, there is no numerical record.

Magisterial Proceedings.

Two summonses were issued relative to notices not complied with, and in two cases summonses were issued for non-compliance with orders of the Justices to abate nuisances from overcrowding.

Housing.

Structural amendment in dwelling-houses for conditions such as defective roofs, spoutings, broken and perished wall and ceiling plaster, defective floors, stairs, windows, etc. have been carried into effect in 494 houses, and in 25 houses overcrowding in sleeping rooms has been abated.

The cases dealt with represent but a small proportion of those which need attention, and the work which needs to be taken in hand with all the despatch possible, is the making in all respects reasonably fit for human habitation, many of the small houses at present in disrepair.

Complaints of the unhealthy condition of living or sleeping rooms, some of them occupied by persons suffering from Tuberculosis, or Pneumonia, Influenza, etc. are numerous, the majority relate to interior renovations only, such as cleansing, papering, or whitewashing of wall and ceiling surfaces. Many property owners are not willing to pay the increased prices for work of this kind, the restricting sections of the Increase of Rent and Mortgage Interest Acts affect seriously owners whose income is derived from small house property (possibly the investment of many years of work), and where there is no illness, the tenant is probably relatively in a better financial state than the owner, and more able to bear the cost of such cleansing, etc., and is expected by the owner to do so.

Food Inspection

The restrictions on slaughtering which came into force about September 1st, 1918, had the effect of confining the slaughter of bovines to the licensed slaughterhouse at rear Nos. 7 and 8 Short Acre, and the slaughter of sheep to the licensed slaughterhouse at the rear of Nos. 64 and 66 Park Street. These measures made for more efficient inspection of carcases dressed for food in the Borough, a qualified Meat Inspector being on duty at each Slaughterhouse, and it can be claimed that the public were thoroughly well protected so far as the soundness of the meat prepared in those slaughterhouses was concerned. Table 6, pages 73 and 74, gives the quantity of unwholesome food dealt with.

Houses Let in Lodgings.

There are 10 Houses Let in Lodgings, overcrowding in 3 of them was satisfactorily abated after notices issued under the Bye-laws, and in 7 of the houses, efficient repairs were made.

It was necessary in two houses to institute prosecutions under the Bye-laws, one for permitting overcrowding, and one for neglecting to limewash the house, these resulted in fines being inflicted of £5 and £2 respectively.

Sale of Food and Drugs Acts and Canal Boats Acts.

The reports of the special work under these Acts will be found on Pages 78 to 81.

Rats Order.

My appointment as Officer under the above order was confirmed on November 9th, 1918. Enquiries were made for ascertaining what districts or premises in the Borough were most infested with rats. Letters were sent to farmers

asking for information as to the amount and nature of any food stuffs which may have been damaged or destroyed by rats on their farms, there was but little response to these letters.

By the end of the year 20 premises were treated, the work however was rather of an experimental nature, and the experience gained was of material help in formulating schemes for rat destruction, which at the time of writing is proceeding satisfactorily.

It has not been found practicable in the year to always carry out the duties of the Health Department in routine order but on the whole, the number of inspections will be found to compare very favourably with previous years, interference with ordinary duties was occasioned in the second and fourth quarters of the year by the increased number of Measles notifications received, added to which during 8 weeks of the last quarter, there was much additional work in connection with the epidemic of Influenza. Each District Inspector has performed his duties efficiently and well, the work of the Clerks has been very satisfactory.

In conclusion I wish to thank the Health Committee for their support and help during the past year.

I am, Mr. Chairman and Gentlemen,

Your obedient Servant,

ARTHUR T. HUBBLE,

Mem. of the Sanitary Inspectors' Association,

Chief Inspector of Nuisances.

Health Department, Council House, Walsall, May, 1919.

SUMMARY OF INSPECTIONS AND VISITS MADE DURING THE YEAR

No. of dwelling-houses examined as to their Sanitary	
condition during District Inspections	, 55
" Inspections of Workshops	33
,, ,, Factories (with regard to Sanitary conveniences)	y 130
" Inspections of Homes of Outworkers	. 299
" Slaughter-houses	. 1951
" Bakehouses	. 187
., , Fishyards	. 173
" Dairies, Cowsheds or Milkshops	477
" Houses Let in Lodgings	. 382
" work proceeding for abatemen	t
of nuisances after notic	e 5944
,, Visits to houses in which Infectious Diseas occurred	e 27 97
" Samples of Water obtained	I
" " under the Sale of Food and Drug Acts	s I2
,, Canal Boats Inspected	8
" Fumigations of Infected Rooms	424
Drain Tests	78
Total recorded visit	ts 23782
No. of Complaints received	398
" Nuisances abated	1642
" Notifications of Infectious Disease receive	•
including Tuberculosis	1430

Table I

Number of Notices for Nuisances and other matters.

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
Foul Drains, water closets, privies		258	300	626
and ashpits	188	258	200	62
• ,	15 1	29		I
,, manure pits ,, ditches or cesspools	I		8	9
,, rain water cisterns	I	3		4
Offensive accumulations of refuse		4	I	14
Animals, &c., so kept as to be a	_	•		•
nuisance	6	3	7	16
Water-closets or privies improperly				
fouled	107	87	110	304
Dwelling-houses needing repairs	94	115	100	309
Dwelling-houses having defective		06	90	0.47
spoutings	63	96	82	241
Dwelling-houses in a dirty state	0	7	13	28
,, or parts thereof over- crowded	9	4	II	24
Dwelling-houses having stagnant		4		24
water in cellar		16	2	18
Dwelling-houses not having suffi-		,		
cient water closets or ashpits	6	10	19	35
Workshops needing limewashing				
and cleansing ,	2	I	4	7
Provide drainage to houses or	•	•	Į.	
factories		4		5
Disconnect rain pipe from drain.		_	I	I
Repair soil pipe		I		I
Backyards needing paving or re-	-		7	P7
paving To limewash houses let in lodgings		3 3	3	8
often Tufertine		3		J
diseases after infectious	1 -0	80	64	202
Carried forward	575	704	643	1922
		1		1

Table I-continued

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
Brought forward To limewash cowsheds (postcards	575	704	643	1922
to occupiers) ,, furnish lists of outworkers	12 15	6 16	24 10	42 41
To BOROUGH SURVEYOR. Building or wells apparently in				
an unsafe condition	8	15	19	42
Defective spoutings discharging on to footpath Insufficient water supply at	6	2		8
dwelling-houses To cleanse ashpits	13	22	33	68 8613
Total	629	765	729	10736
No. of notices on books 31/12/17 No. of nuisances and other matters	1	34	45	107
reported during the year No. of informal notices served	496	629	569	1694
during the year ‡ No. of statutory notices served	453	545	434	1432
during the year *No. of notices not complied with	120	183	114	417
December 31st, 1918 ‡ A notice may include several nuisances or other matters.		49	56	159
*The notices not complied with included viz.:— Nuisances Housing repairs Insufficient closets, &c Other matters	6	16 23 5 5	12 30 6 8	36 85 17 21

Table II

Sanitary Work in compliance with notices.

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
No. of privies converted into water closets	85 15 2 6 	2 109 12 11 8	No. 3 District. 1 76 6 2 3 5 32 12 24 35 16 7 100 35 9 12 8	3 270 33 15 17 5 111 52 83 46 20 2 20 295 168 25 48 8
new soil pipes wash-houses repaired privies demolished & removed ashpits water closets, urinals new ashpits	16 2 7 — 2 1	15 1 14 • 1 —	8 28 I I	39 3 49 I I 2 I I
anti-flood traps cellar drains cut off intercepting traps water closets having flushing cisterns provided *includes Pedestals	I 4 4 4	 I 3 2	5 5	5 I 7 II

Table II-continued

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
DWELLING-HOUSES OR PARTS THEREOF REPAIRED AND				
RENOVATED ,, houses having spoutings made	71	85	66	222
good ,, houses cleansed, coloured and	36	III	94	241
re-papered by owners, ditto by occupiers	8 I	10	5 7	23
Total	116	206	172	494
OVERCROWDING. No. of houses in which the number				
of inmates was reduced No. of houses vacated	8 2	4	8 3	20 5
Total	10	4	II	25
Complaints of alleged nuisances received and investigated		174	105	398

'Table III Housing, Town Planning, &c. Act 1909

Unfit Houses.

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL
Houses repaired and made reasonably fit Houses closed voluntarily Houses demolished	7 2	2	4 1 , 6	11 3 8

The houses closed voluntarily were Nos. 3 and 4 in Court I, Hill Street and house back II Elmore Row, Bloxwich.

The demolished houses were situate Nos. 270, 272, 274, 276, 278 and 280 Green Lane, Birchills, and 2 houses corner of Station Street and Bridgeman Street.

Table IV.

Samples of Water.

		No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
Samples taken—Well water Notices No of houses supplied with W. W. water	S. S.	6	I I 6		I I I2

District Inspection

This work has proceeded steadily throughout the year, a portion of each ward has been inspected, the number of houses visited being, viz.:—

No 1 District.	No. 2 District.	No. 3 District.	TOTAL.
3430	3940	3385	10755

Table Y TRADES—Dairies, Cowsheds and Milkshops

Each cowshed is limewashed at least twice during the year.

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
No. of persons registered during the year as cow-keepers or milk-sellers		. 6	3	II
reg'd cowkeepers , purveyors , milkshops 31/12/18	12 12 22	5 20 42	19 17 17	36 49 81
Total ·	46	67	53	166
milking cows kept inspections	189	86 170	182 129	457 477

Bakehouses

Each bakehouse is limewashed at least twice during the year

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
No. of bakehouses in use , registered as factories , inspections	1 2	26	16	54
	5	9	8	22
	5 5 5	93	39	187

Slaughter-houses

	No. 1	No. 2	No. 3	
	District.	District.	District.	TOTAL.
No. of registered slaughter-houses,			ı	, 6
31/12/18	6	5	5	16
31/12/18	7	7	8	22
Total	<u>I3</u>	12	13	38
No. of Slaughter-house licenses		,		
issued (for one year)	6	7	8	21
" inspections	673	504	774	1951

Several Slaughter-houses, owing to restrictions under Food Control Orders, have not been used in the last few months of 1918.

Fried Fish Shops

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
No. of shops where consent to establish a	16	20	13	49
business was given	I	2	7	10

Workshops

	No. 1 District.	No. 2 District.	No. 3 District.	TOTAL.
No. of inspections of workshops , factories Work carried out in compliance with notices, viz.:—	21 14	1 95	33	55 130 ·
No. of rooms limewashed and cleansed	3	I	4	8
Other nuisances abated, Factories and Workshops	5	I	2	8
HOMEWORK. Lists received twice per year) Clothing 29, Chains 4, Paper bags 2, Cart gear 2, Brushes II				48
No. of contractors ,, male outworkers ,, female ,, ,, visits	56	 133	I I O	5 40 221 299

Table VI

Unwholesome Food Destroyed.

TUBERCULOUS.

BOVINE 7 Carcases and all organs, 2 Fore-quarters, 7 Heads 27 Pieces of Beef, 3 all organs, 58 sets of lungs, 18 Livers, 1 Heart, 10 Mesenteries, and 31 other organs.

Pigs I Carcase and all organs, 4 Heads, 2 sets Fry, 3 all organs, 21 lbs. Pork.

Table VI-continued

OTHER DISEASES, UNSOUND, &c.

BOVINE I Carcase and all organs, I Hind quarter,
73 lbs. Beef 2 Heads, 3 sets Lungs, 29 Livers,
3 other organs.

FROZEN BEEF 102 lbs.

VEAL I Carcase and all organs.

PIGS 4 Carcases and all organs, and 36 lbs. Pork, 294 lbs. Imported Fries, 2 all organs, 3 other organs

SHEEP 6 Carcases and all organs, 24 lbs. of Mutton, I Head, 10 Livers and I set of Lungs.

RABBITS 80 Foreign, I English.

DUCK, I HAM, 7 lbs. BACON, 16 lbs.

TOMATOES, 4 lbs. PEARS, 14 lbs. GRAPES, 100 lbs.

FISH Mackerel, 9 boxes, Herrings, 2½ boxes,

Kippers, 3 boxes Eels, 10 lbs.

Mussels, 58 lbs. Cods Roe, 50 lbs. Shrimps, 11\frac{3}{4} lbs. 6 Salmon (frozen).

CANNED GOODS.

FISH 27 tins. FRUIT 23 tins. CONDENSED MILK, 4 tins.

CORNED BEEF 3 tins. PICKLES 4 bottles.

In 28 cases seizures were made and Justices' Orders obtained. In the other cases the food stuffs were surrendered voluntarily on inspection.

The orders related to, viz.:—Meat 18, Fish 4, Rabbits 3, Ham 2, and Game 1.

Table VII.

Magisterial Proceedings.

Act under which Proceedings were taken.	Nature of Offence.	No. of Persons Summ'ned	Remarks.
Public Health Act, 1875	Defective roof of house & defective sink	1	Order made for abatement with one month
ditto	Not obeying Justices order to abate overcrowding	_	Fined £1
ditto	Ditto	1	Fined 10/-
ditto	Foul W.C	1	Work done, su. mons withdrawn payment ofcosts
ditto	Exposing an unsound duck for safe	1	Fined £5
Public Health Act Amendment Act, 1907	Absence of and defective spoutings.		Order made to coply with not within 14 days
Bye-laws*	Neglecting to lime- wash house let in lodgings	וֹ	Fined £2
ditto	Permitting over- crowding in house let in lodgings		Fined £5
Sale of Food and Drugs Acts	Selling watered mill	1	Summons withdra
ditto	Ditto	1	Ordered to pay ct 15/6

Table VIII

Infectious Diseases

Notifications of 1,183 cases of disease (exclusive of Tuber-culosis) were received from January 1st, 1918 to December 31st, 1918.

	*				No. 1 District.	No. 2 District.	No. 3 District.	TOTAL
No.	of visits	s to infect	ed hous	ses	893	1164	740	2797
,,	notices	to lime-w	ash roo	oms	58	80	64	202
"	houses t	fumigated	by Insp	ectors	132	157	135	424
,,	infected	d houses, I	Dec. 31st	, 1917	3	12	8	23
"	,,	"	"	1918	8	13	10	31
	•	et fever theria les			6 - 2	6 2 4	2 2 5	14 4 11
	Ente	ric Fever		• • •		I		I
	Cerel	bro Spina	l Fever	• • •			I	I
	No. of	persons si	applied	with b	rushes	•••	13	381
	"	,,	"	lin	ne	• • •	16	582
	,,	,,	,,	Di	sinfect	ants	15	319

Number of Notices sent to Schools respecting Infectious Diseases in houses from which children attend School, January 1st, 1918 to December 31st, 1918.

NAME OF SCHOOL		No. of Notices sent re Infected Houses.	No. of Notices sent, Houses free from Infection.
Bath Street	•••	2	2
Blakenall		2	2
Bridge		7	7
Butts ···		7	5
Caldmore		3	5 3 18
Chuckery		18 ^	18
Centenary		2	2
Croft Street		6	7
Elmore Green		14	13
Field Street		6	6
Hillary Street	• • •	14	16
Leamore		3	4
National (Bloxwich)		9	I 2
North Walsall		10	II
Palfrey	• • •	14	17
St. Andrews	• •	5	5 2
St. John's, Pleck	• • •	I	
St. Mary's Roman Catholic	c	· I	I
St. Matthew's	• • •	7	6
St. Patrick's Roman Catho		2	3
St. Peter's Roman Cathol	ic (Blox-		
wich)		I	I
St. Peter's (Marlow Street)	• • •	I	2
Tantarra Street	• • •	4	5 7
Wesley (Ablewell Street)	9	6	The state of the s
Whitehall	• • •	ΙΪ	14
Whitehouse Street	* * *	I	2
Wisemore	••	4	5
Wolverhampton Road	•••	22	22
Others	• • •	10	8
Measles Cases	• • •	748	
To	otal	941	208 = 114

Notices to	Sunday Schools of Infected Houses	• • •	540
••	Medical Inspector of Schools		839
	Total		2510

Sale of Food and Drugs Acts

Report showing number and result of Analysis of samples and proceedings taken, during the year ended December 31st, 1918.

Description o	of Article Anal	ysed.	Total number of samples.	Number certified as genuine.	Number certified as adulterated.
Milk Butter Margarine Cheese Dripping Lard Pepper Coffee	Total		70 19 2 9 6 9 3 3	65 18 2 9 6 9 3 3	5 I — — — —
	1 otal	•••	121	115	0
Nu	ımber of Fo	ormal S	Samples	• • •	74
Nu	ımber of In	formal	Samples	•••	47
			-	Γotal	121

⁷ Purchases of Margarine were also made, and the requirements of the Acts as regards labelling and the use of a marked wrapper were complied with.

Margarine was purchased (in April) at II shops, and 7 other shops were visited. It was found that the provisions of the Act relative to the affixing of a label and the use of a marked wrapper, were not complied with. On the instructions of the Health Committee, a hand-bill was issued to each retailer of Margarine in the Borough.

Four hundred and thirteen shops at which Margarine was hold by retail were visited, and in 185 only of these shops (or 44% of the total) labels and wrappers were provided, in the remaining shops, in 93 cases there was neither a label or wrapper in use, at 75 shops the shopkeeper had wrappers, but no labels, and at 60 shops a label was used but the shopkeeper had no marked wrappers.

The hand-bill has had a good effect, the majority of shopkeepers are now complying.

Administrative Action in regard to Samples reported against

LEGAL PROCEEDINGS INSTITUTED UNDER THE SALE OF FOOD AND DRUGS ACTS.

Name of Article.	Identification numbergiven to sample and date of purchase.	Result of Analysis.	Amount of Fine.	Amount of Costs.
Milk	No. 82 Oct. 2/18	8% added water		15/6

LIST OF ADULTERATED SAMPLES FOR WHICH LEGAL

PROCEEDINGS WERE NOT INSTITUTED.

Name of Articie.	Identification number given to sample and date of purchase.	Result of Analysis.	Course adopted.	Remarks.
Butter	No. 26 Apr. 17/18	Was Margarine	Vendor cautioned and special enquiry made into conditions under which margarine is retailed	This was Margarine sold from a parcel having a label attached, but a plain paper wrapper was used.
Milk	No. 30 May 1/18	16% deficient in cream	Health Committee ordered Vendor to be cautioned by letter	
Do	Nos. 50 & 51 Aug. 17/18	Each 13% deficient in cream	Samples were on Sept. 4th & Sept 11th taken from farmer in course of delivery and found to contain 2.92% and 3.25% of fat respectively Health Committee ordered Vendor to be cautioned by letter	
Do	No. 121 Dec. 17/18		Health Committee ordered Vendor to be cautioned by letter	

ARTHUR T. HUBBLE,

Inspector under the Sale of Food and Drugs Acts.

Health Department,
Council House, WALSALL,
Jan. 1st, 1919.

Canal Boats Acts

INSPECTIONS.

Boats

Number of Boats inspected			8
Number of Boats conforming with Acts and	ions	4	
Number of Boats with one or more infringer		4	
Occupants			
Number of men on Boats inspected			8
Number of women on Boats inspected	• • •	• • •	. 9
Number of children on boats inspected			14

The total registered accommodation on the 8 boats was for 25 adult persons, and the total number occupying equalled 24 adults.

The condition of the boats examined may be classified as follows:—4 good, 2 fair and 2 bad.

The occupants with the exception of 2 children suffering from Whooping Cough appeared to be in good health.

Nature of Infringements

Absence of Certificate	• • •	•••	1
Female over 12 improperly	occupying	• • •	1
Absence of water vessel	•••		1
Dilapidations	• • •		1
	Total		4
Infringements remedied			4

Two cases of Infectious Disease (Whooping Cough) occurred on one boat.

ARTHUR T. HUBBLE,

Inspector under the Canal Boats Acts, and Inspector of Nuisances.

January 1st, 1919.

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Luffuenza Enidemic	19 +	0 22 65				

